TSD File Inventory Index

Date: June 24, 2004

Initial: CM Received

Facility Name: Honeywell International, Inc. (Denton - One Folder Site)

Facility Identification Number: DHD 043 730 217

A.1 General Correspondence	Y	B.2 Permit Docket (B.1.2)	
A.2 Part A / Interim Status	Y	1 Correspondence	X
1 Correspondence	Y	.2 All Other Permitting Documents (Not Part of the ARA)	X
.2 Notification and Acknowledgment	Y	C.1 Compliance - (Inspection Reports)	X
.3 Part A Application and Amendments	X	C.2 Compliance/Enforcement	
4 Financial Insurance (Sudden, Non Sudden)		.1 Land Disposal Restriction Notifications	X
5 Change Under Interim Status Requests		.2 Import/Export Notifications	
6 Annual and Biennial Reports		C.3 FOIA Exemptions - Non-Releasable Documents	
A.3 Groundwater Monitoring		D.1 Corrective Action/Facility Assessment	
1 Correspondence		.1 RFA Correspondence	X
2 Reports		.2 Background Reports, Supporting Docs and Studies	
A.4 Closure/Post Closure		.3 State Prelim. Investigation Memos	
1 Correspondence	Y	4 RFA Reports	
2 Closure/Post Closure Plans, Certificates, etc	Y X	D. 2 Corrective Action/Facility Investigation	X
A.5 Ambient Air Monitoring		1 RFI Correspondence	
1 Correspondence		.2 RFI Workplan	
2 Reports		.3 RFI Program Reports and Oversight	
B.1 Administrative Record		4 RFI Draft /Final Report	

Total - 1

5 RFI QAPP		7 Lab data Soil Sampling/Groundwater	
6 RFI QAPP Correspondence		8 Progress Reports	
7 Lab Data, Soil-Sampling/Groundwater		**D.5 Corrective Action/Enforcement**	
8 RFI Progress Reports		1 Administrative Record 3008(h) Order	
9 Interim Measures Correspondence		.2 Other Non-AR Documents	
10 Interim Measures Workplan and Reports		**D.6 Environmental Indicator Determinations**	
D.3 Corrective Action/Remediation Study		.1 Forms/Checklists	
1 CMS Correspondence		**E. Boilers and Industrial Furnaces (BIF)**	
.2 Interim Measures		.1 Correspondence	
.3 CMS Workplan		.2 Reports	
.4 CMS Draft/Final Report		**F Imagery/Special Studies** (Videos, photos, disks, maps, blueprints, drawings, and other special materials.)	
.5 Stabilization		**G.1 Risk Assessment**	
.6 CMS Progress Reports		.1 Human/Ecological Assessment	
.7 Lab Data, Soil-Sampling/Groundwater		.2 Compliance and Enforcement	
D.4 Corrective Action Remediation Implementation		.3 Enforcement Confidential	
1 CMI Correspondence		.4 Ecological - Administrative Record	
.2 CMI Workplan		.5 Permitting	
3 CMI Program Reports and Oversight		.6 Corrective Action Remediation Study	
4 CMI Draft/Final Reports		.7 Corrective Action/Remediation Implementation	
5 CMI QAPP		.8 Endangered Species Act	
6 CMI Correspondence		.9 Environmental Justice	

Note Transmittal Letter to Be Included with Reports

Comments Documents do not qualify for individual folders per schedule.

A.1 Public Participation

7 MAR 1988

5HW-13

Ms. Kirsten Edwards
Bricker and Eckler
100 East Broad Street
Columbus, Ohio 43215

Re: Freedom of Information Act Request
No. R1H-3453-88

Dear Ms. Edwards:

This is a follow-up to our letter of February 2, 1988, in response to your Freedom of Information Act request. We are enclosing copies of records pertaining to the following facility:

Allied Chemical Corporation
Ironton Tar Plant
3330 South Third Street
Ironton, Ohio 45638
ID # OHD043730217

Documents enclosed include the following:

1) Notification of Hazardous Waste Activity
2) Application for a Hazardous Waste Permit -- Part A
3) Part B Checklist
4) Notification of Hazardous Waste Site, Section 103(c), Comprehensive Environmental Response, Compensation and Liability Act (CERCLA)
5) Interim status standard inspection report, Allied Chemical Corporation, March 24, 1982.

As advised in our previous letter, the reproduction and search time costs are $28.70. Your check for that amount has been received by our Financial Operations Section.

Please contact Dianne Rowland of my staff at (312) 886-3713, if you have any questions.

Sincerely,

Basil G. Constantelos, Director
Waste Management Division

Enclosures

cc: Allied Chemical Corporation
Ohio Environmental Protection Agency

bcc: A. Brash (xeroxed copy)
C. Kavcic, WMD
J. Mason, FOS
J. Oaks, PPB

5HW-13:WMB:RAIU:D.ROWLAND:E.GARDNER 3/2/83 (2)

PUBLIC NOTICE Lawrence County

RECEIPT OF HAZARDOUS WASTE CLOSURE PLAN

For: Allied Signal, Inc., Ironton Tar Plant, 3330 South Third Street, Ironton, Ohio 45638, U.S. EPA ID No.: OHD043730217, Ohio Permit No.: 04-44-0059. Pursuant to OAC Rule 3745-66-10 thru 17 and 40 CFR, Subpart G, 265.110 thru 117, the Ohio Environmental Protection Agency (Ohio EPA) is hereby giving notice of the receipt of a Hazardous Waste Facility Closure Plan for a storage area at the above referenced facility. Ohio EPA is also giving notice that this facility is subject to a determination concerning corrective action, a requirement under the Hazardous and Solid Waste Amendments of 1984, which concerns any possible uncorrected releases of hazardous waste or hazardous constituents to the environment from any current or previous solid waste management units at the above facility. A corrective action determination is required from hazardous waste facilities intending to close.

Copies of the facility's Closure Plan will be available for public review at the Briggs-Lawrence County Library, 321 S. Fourth Street, Ironton, Ohio 45638 and the Ohio EPA, Southeast District Office, 2195 Front Street, Logan, Ohio 43138. Comments concerning the Closure Plan or factual information concerning any releases of hazardous waste or hazardous waste constituents by the above facility requiring corrective action should be submitted within 30 days of this notice to: Ohio Environmental Protection Agency, Div. of Solid & Hazardous Waste Mgmt., Data Management Section, Attn: Thomas E. Crepeau, Box 1049, Columbus, Ohio 43266-0149.

A.2 Part A/
Interim Status

OhioEPA
State of Ohio Environmental Protection Agency

P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149
(614) 644-3020
FAX (614) 644-2329

George V. Voinovich
Governor

Donald R. Schregardus
Director

May 14, 1993

Allied Signal Inc.
Attn: H. Simon
3330 South Third Street
Ironton, OH 45638

RE: EPA ID#: *OHD043730217*

LOCATION of INSTALLATION: *3330 S Third St*
Ironton, OH 45638

In response to your request of March 1993 the following information has been updated:

Contact: H. Simon

Status: large quantity generator and Burner/Blender

If you have any questions, please contact Beth Barrett at (614)644-2977.

Sincerely,

Thomas E. Crepeau

Thomas E. Crepeau, Manager
Data Management Section
Division of Hazardous Waste Management

TEC/bab

cc: U.S. EPA, Region V
Ohio EPA District Office

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:
RCRA ACTIVITIES

attn: R.L. Haley
Allied Signal INC
3330 S. Third street
Ironton, Oh 45638

APR 17 1987

RE: EPA ID #: OHD043730217

In response to your request of 6-27-86 the following information has been updated:

Installation Contact to: R.L. Haley

Added - off spec used oil burning, industrial boiler; furnace

If you have any questions, please contact Sharon Kiddon at (312) 886-6173.

Sincerely,

Arthur Kawatachi

Arthur S. Kawatachi
Information Unit
Program Management Section

cc: State Agency
File

Notification
11/9/92

OhioEPA
State of Ohio Environmental Protection Agency

P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149
(614) 644-3020
FAX (614) 644-2329

George V. Voinovich
Governor

Donald R. Schregardus
Director

October 9, 1992

Allied Signal Inc.
R. K. Goetz
3330 South Third St.
Ironton, OH 45638

Dear Notifier:

Our records indicate that two United States Environmental Protection Agency (US EPA) Identification (ID) numbers were issued to the location of:

3330 S Third St.
Ironton, OH 45638

The correct US EPA ID number for this location is: OHD043730217.

DO NOT USE US EPA ID number OHD000772749. This number has been inactivated.

If you have questions, please contact Ms. Beth Barrett, telephone (614)644-2977.

Sincerely yours,

Thomas E. Crepeau

Thomas E. Crepeau, Manager
Data Management Section
Division of Hazardous Waste Management

TEC/bab

cc: U.S. EPA, Region V

UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION V
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

APR 22 1982

REPLY TO ATTENTION OF:
RCRA ACTIVITIES

Charlie L. Davidson, Plant Manager
Allied Chemical Corporation - Ironton Tar Plant
3330 South Third Street
Ironton, Ohio 45638

RE: Interim Status Acknowledgement USEPA ID No. OHD 043 730 217
FACILITY NAME: ALLIED CHEMICAL CORP IRONTON TAR PLANT

Dear Mr. Davidson:

This is to acknowledge that the U.S. Environmental Protection Agency (USEPA) has completed processing your Part A Hazardous Waste Permit Application. It is the opinion of this office that the information submitted is complete and that you, as an owner or operator of a hazardous waste management facility, have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. However, should USEPA obtain information which indicates that your application was incomplete or inaccurate, you may be requested to provide further documentation of your claim for Interim Status. Our opinion will be reevaluated on the basis of this information.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265, or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The printout enclosed with this letter identifies the limit(s) of the process design capacities your facility may use during the interim status period. This information was obtained from your Part A Permit application. If you wish to handle new wastes, to change processes, to increase the design capacity of existing processes, or to change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

As stated in the first paragraph of this letter, you have met the requirements of 40 CFR Part 122.23; your facility may operate under interim status until such time as a permit is issued or denied. This will be preceded by a request from this office or the State (if authorized) for Part B of your application. Please contact Arthur Kawatachi of my staff at (312) 886-7449, if you have any questions concerning this letter or the enclosure.

Sincerely yours,

Karl J. Klepitsch, Jr., Chief
Waste Management Branch

4/20.82

Enclosure

cc: A. H. Baker

nt or type with ELITE type (12 characters p n) in the unshaded areas only

Form approved. OMB No. 2050-0028. Expires 9-30-88.
GSA No. 0246-EPA-OT

United States Environmental Protection Agency
Washington, DC 20460

EPA Notification of Hazardous Waste Activity

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law *(Section 3010 of the Resource Conservation and Recovery Act).*

For Official Use Only

Comments

C C

Installation's EPA ID Number														Approved	Date Received (yr. mo. day)
C F	O	H	D	0	4	3	7	3	0	2	1	7	T/A C 1		

I. Name of Installation

ALLIED-SIGNAL, INC.

II. Installation Mailing Address

Street or P.O. Box

C 3: 3330 SOUTH THIRD STREET

City or Town	State	ZIP Code
IRONTON	OH	45638

III. Location of Installation

Street or Route Number

C 5: SAME

City or Town	State	ZIP Code

IV. Installation Contact

Name and Title *(last, first, and job title)*	Phone Number *(area code and number)*
C 2: HALEY R.L. MANAGER	6145331040

V. Ownership

A. Name of Installation's Legal Owner	B. Type of Ownership *(enter code)*
C R: ALLIED-SIGNAL, INC.	P

VI. Type of Regulated Waste Activity *(Mark 'X' in the appropriate boxes. Refer to instructions.)*

A. Hazardous Waste Activity

- ☐ 1a. Generator
- ☐ 1b. Less than 1,000 kg/mo.
- ☐ 2. Transporter
- ☐ 3. Treater/Storer/Disposer
- ☐ 4. Underground Injection
- ☐ 5. Market or Burn Hazardous Waste Fuel *(enter 'X' and mark appropriate boxes below)*
  - ☐ a. Generator Marketing to Burner
  - ☐ b. Other Marketer
  - ☐ c. Burner

B. Used Oil Fuel Activities

- ☒ 6. Off-Specification Used Oil Fuel *(enter 'X' and mark appropriate boxes below)*
  - ☐ a. Generator Marketing to Burner
  - ☐ b. Other Marketer
  - ☒ c. Burner
- ☐ 7. Specification Used Oil Fuel Marketer *(or On site Burner)* Who First Claims the Oil Meets the Specification

RECEIVED
JUL 01 1986
WASTE PROGRAM

VII. Waste Fuel Burning: Type of Combustion Device *(enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)*

☐ A. Utility Boiler ☒ B. Industrial Boiler ☒ C. Industrial Furnace

VIII. Mode of Transportation *(transporters only — enter 'X' in the appropriate box(es)*

☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other *(specify)*

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☐ A. First Notification ☒ B. Subsequent Notification *(complete item C)*

C. Installation's EPA ID Number											
0	H	D	0	4	3	7	3	0	2	1	7

ID — For Official Use Only														
C													T/A	
W														1

X. Description of Hazardous Wastes *(continued from front)*

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 *CFR* Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 *CFR* Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 *CFR* Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 *CFR* Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. *(See 40* CFR *Parts 261.21 — 261.24)*

☐ 1. Ignitable *(D001)* ☐ 2. Corrosive *(D002)* ☐ 3. Reactive *(D003)* ☐ 4. Toxic *(D000)*

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature	Name and Official Title *(type or print)*	Date Signed
R.L. Haley	PLANT MANAGER	6/27/86

ALLIED Chemicals

Ironton Tar Processing Plant
3330 South Third Street
Ironton, OH 45638

June 27, 1986

RCRA Activities
U.S. EPA Region V
Waste Management Division
P.O. Box A3587
Chicago, Ill. 60690

Dear Sir,

Please find attached Notification for the Ironton Tar Plant's Waste-As-Fuel Activities. Approval of the Used Oil Fuel is expected July, 1986, as per the OEPA PTI Application #07-127.

Sincerely,

R. L. Haley
Plant Manager

cc: Ohio EPA
Division of Solid & Hazardous Waste Management/
Tech. Assistance & Waste Management Section
P.O. Box 1049
Columbus, Ohio 43266-0149

RLH/km

5-15-13 OHD 043 730 217

SENDER: Complete items 1 and 2 when additional services are required, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *↑(Extra charge)↑*
2. ☐ Restricted Delivery *↑(Extra charge)↑*

3. Article Addressed to:

L. L. Haley
3330 S. 3rd St
Ironton, Oh 45638

4. Article Number
P 70 706 322 1

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X Jeri Baker

6. Signature – Agent
X

7. Date of Delivery
4-18-88

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Mar. 1987 ★ U.S.G.P.O. 1987-178-268 **DOMESTIC RETURN RECEIPT**

OHD 043 730 217

5-15-13
P 70 063 221

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to	L. L. Haley
Street and No.	3330 S. 3rd St
P.O. State and ZIP Code	Ironton, Oh 45638
Postage	$3.18
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$4.93
Postmark or Date	APR 15 1988 USPO

PS Form 3800, June 1985

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address, and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

Anita Baseman 5HS-13
US EPA 230 So Dearborn
Chgo, Ill 60604

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

Anita Baseman 5HS-13

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier. (no extra charge)

2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.

3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.

4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.

5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.

6. Save this receipt and present it if you make inquiry.

☆ U.S.G.P.O. 1987-176-131

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:
5HS-13

15 APR 1988

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

SEPO

R. L. Haley
Plant Manager
Allied Signal, Incorporated
3330 South 3rd Street
Ironton, Ohio 45638

RE: Part B Call-in
Allied Signal, Incorporated (Parent of Allied Tar facility referring to
OHD 043 730 217

Dear Mr. Haley:

Some time ago, you should have received an acknowledgement of the United States Environmental Protection Agency's (U.S. EPA) receipt of your Part A permit application material for the above-referenced hazardous waste facility under the Resource Conservation and Recovery Act (RCRA) permit program. Accordingly, your facility is currently authorized with interim status under Section 3005(e) of RCRA. This letter constitutes the next step in the formal process leading toward issuance or denial of a RCRA permit. Under the authority of 40 CFR §270.10, this is a formal request for submittal of Part B of the permit application for the above-referenced facility. The Part B application is due six months from the date you receive this letter.

Enclosed is a copy of 40 CFR Part 270 which lists the items required for submitting the Part B permit application for your facility. A copy of the "Part B Completeness Checklist" is enclosed to help you in preparing a comprehensive and complete permit application.

If your facility chooses not to pursue a full RCRA permit, you may withdraw your intent to seek a permit by filing a closure plan with the U.S. EPA and Ohio Environmental Protection Agency (OEPA). Federal RCRA closure regulations (40 CFR Subpart G) require that you submit a closure plan to: George Hamper (5HS-13), Chief, Ohio Section, U.S. EPA - Region V, 230 South Dearborn Street, Chicago, Illinois 60604. Approval by both Agencies is necessary prior to commencement of any activities that are part of the closure plan.

Some facilities may be unable to comply with the financial responsibility requirements for liability coverage under 40 CFR §264.147. If your facility is unable to meet these requirements, or any other applicable requirements of 40 CFR Parts 270 or 264, then we must deny the permit for your facility. In that case, you would probably want to submit a closure plan under 40 CFR Subpart G rather than the completed Part B application.

If your facility never actually treated, stored, or disposed of hazardous waste under RCRA, then it may not be necessary to submit either a Part B application or a closure plan. However, you will have to submit a Part A withdrawal request for review. This request must demonstrate that your facility never actually qualified for interim status because either: 1) the waste was not a hazardous waste as defined in 40 CFR §261; 2) that there has been no treatment, storage, or disposal of the waste since November 19, 1980; or 3) that the hazardous waste management process was exempt from the permitting requirements of RCRA. For example, storage of waste generated on-site in containers or tanks less than 90 days is exempt from the permitting requirements of RCRA in accordance with 40 CFR §262.34. Likewise, treatment in a wastewater tank is exempt under 40 CFR §270.1(c)(2)(u). A withdrawal request must incorporate the signatory requirements contained in 40 CFR §270.11.

The Agency is committed to conducting the RCRA permitting process as efficiently as possible. Consequently, you may want to contact Ms. Anita Boseman of my staff, at (312) 353-4734, to discuss any questions or concerns you have regarding the preparation of the application. Ms. Boseman will be available to discuss specific needs of your application or to meet with you in Chicago. These efforts are intended to generate complete applications, without requiring any information beyond that which is necessary to make RCRA permit decisions.

Should you have any questions about confidentiality of information, please refer to the enclosed rules on confidentiality as set forth in 40 CFR Part 2 and 40 CFR §270.12 of RCRA. If you anticipate asserting a claim of confidentiality, please review the above-referenced enclosure regarding substantiation of confidentiality (§2.208) that sets forth the criteria that must be met for claiming confidentiality.

Please be reminded that submission of the Part B application must be made six months from the receipt date (i.e., date this letter is received). Upon completion of the application, please send two copies to the U.S. EPA and three copies to the OEPA. Please number each page of the application uniquely, including all attachments (maps, specifications, etc.). A certification statement identical to the one stated in 40 CFR §270.11(d) must accompany each application and all additional submittals. Send two copies of the application to the following address:

RCRA ACTIVITIES
Part B Permit Application
U.S. EPA, Region V
Post Office Box A-3587
Chicago, Illinois 60690-3587

Send three copies to: Thomas Crepeau
Ohio Environmental Protection Agency
Division of Solid & Hazardous Waste Management
Post Office Box 1049
Columbus, Ohio 43266-1049

Failure to furnish the complete Part B permit application by the above date, and to provide in full all required information, is grounds for termination of interim status under 40 CFR §270.10. In addition, failure to answer this request may also result in subsequent enforcement action by the U.S. EPA.

Upon receiving the Part B application, the U.S. EPA will coordinate its review with the OEPA and will strive for the simultaneous issuance of Federal and State hazardous waste facility permits. It is possible that during the processing of the application, the State hazardous waste program may become authorized to issue RCRA permits for your type of facility. In that case, direct Federal processing will cease, and OEPA, in lieu of U.S. EPA, will make the final determination on your permit application.

A copy of 40 CFR Part 264 is enclosed to help you in addressing the requirements and standards for the operation of treatment, storage and disposal facilities. These standards will become applicable to your facility upon issuance of a RCRA permit by U.S. EPA. A copy of the July 14, 1986, hazardous waste tank system regulatory amendments is also enclosed. These new rules establish technical standards and operating procedures for the owners and operators of tank systems that use tanks for accumulating, storing or treating hazardous waste. These rules may be applicable to your facility and are, therefore, enclosed for your information.

On November 8, 1984, the Hazardous and Solid Waste Amendments of 1984 (HSWA) were signed into law. This new law amends RCRA and contains many provisions which may affect your facility. Under the corrective action requirements of HSWA, your facility is required to correct all releases of hazardous waste or constituents from any solid waste management unit, regardless of the time at which waste was placed in the unit. Please note that the corrective action requirements apply to all solid waste management units, not just the hazardous waste management units subject to the permitting requirements. Enclosed is a document entitled "Certification Regarding Potential Releases from Solid Waste Management Units." It is necessary for you to complete and submit this form with your Part B application to help address corrective action requirements. If you previously completed and submitted this form, and if the information is accurate and up-to-date, you may simply include a copy of your previous submittal in your Part B application.

This Agency looks forward to working with you toward fulfilling the above request. Again, should you have any questions concerning the above matter, please contact us for assistance.

Sincerely,

Wm. E. Muno

William E. Muno
Acting Associate Division Director
Office of RCRA

Enclosures: 40 CFR Part 270 (applicable parts)
Part B Completeness Checklist
40 CFR Part 2 (applicable parts)
40 CFR Part 264 (applicable parts)
Certification Regarding Potential Releases from Solid Waste Management Units

cc: Paul Flanigan, OEPA
District Office Manager, OEPA
Ed Lim, OEPA

HEADER INFORMATION - PERMIT/CLOSURE TRACKING

NEW ENTRY ONLY

FACILITY NAME Allied Signal, Inc. FACILITY I.D. # OHD 043 730 217

HEADER TYPE: (Circle one)
(C2001)

(P) = permit, includes FMP process
M = permit modification
W = post-closure permit
R = research & development
C = closure (for LDF-clean closure only)
L = post-closure activities

HEADER PROCESS TYPE: (Circle one)
(C2003)

(S) = storage, treatment
I = incineration
D = disposal

HEADER PROCESS INDICATOR: (Circle one)
(C2051)

(R) = requested (Call-in)
S = submitted
C = covered (permit issued or closure plan approved)

Date covered (C2004)

* PROCESS CODE (C2052)	* PROCESS AMT. (C2053)	* PROCESS UNITS (C2054)
S01	6060.00	G
S02	150000.00	G
T01	20000.00	U

* See key on reverse side.

o ACTION EVENT (CODE)	RESP. AGENCY	RESP. PERSON	DUE DATE	ACTUAL DATE	o STATUS CODE
01	E	AJB		4/15/88	
02	E	AJB	10/18/88		

o See appropriate portion of Permit Issuance Tracking document for applicable codes.

Revised 2/3/88

4/29/88 CD

KEY

PROCESS	PROCESS CODE	APPROPRIATE* UNITS OF MEASURES	UNIT OF MEASURE	CODE
STORAGE:			GALLONS	G
			LITERS	L
CONTAINER	S01	G or L	CUBIC YARDS	Y
TANK	S02	G or L	CUBIC METERS	C
WASTE PILES	S03	Y or C	GALLONS PER DAY	U
SURFACE IMPOUNTMENT	S04	G or L	LITERS PER DAY	V
			TONS PER HOUR	D
DISPOSAL:			METRIC TONS/HOUR	W
INJECTION WELL	D79	G, L, U, or V	GALLONS/HOUR	E
LANDFILL	D80	A or F	LITERS/HOUR	H
LAND APPLICATION	D81	B or O	ACRE-FEET	A
OCEAN DISPOSAL	D82	U or V	HECTARE-METER	F
SURFACE IMPOUNDMENT	D83	G or L	ACRES	B
			HECTARES	O
TREATMENT:			POUNDS/HOURS	J
TANK	T01	U or V	KILOGRAMS/HOUR	R
SURFACE IMPOUNDMENT	T02	U or V	TONS PER DAY	N
INCINERATOR	T03	D,W,E,H, or K	METRIC TONS/DAY	S
OTHER	T04	U,V,J,R,N, or S	BTU'S/HOUR	K

16

OhioEPA
State of Ohio Environmental Protection Agency
P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149

Toward A Cleaner Environment
15 Year Anniversary
1972 - 1987

Richard F. Celeste
Governor

April 28, 1988

RE: OHIO PART B CALL-IN
US EPA ID NO.: OHD043730217
OHIO PERMIT NO.: 04-44-0059

CERTIFIED MAIL

Mr. R.L. Haley, Plant Manager
Allied-Signal Corporation
3330 South Third Street
Ironton, OH 45638

Dear Mr. Haley:

The purpose of this letter is to formally request the submittal of Part B of your Ohio hazardous waste permit application according to the requirements of Rule 3745-50-40(A)(2) of the Ohio Administrative Code.

Although you may have already submitted a Part B application to the US EPA, that application was for your federal RCRA permit. According to Ohio regulations, a Part B application must be reviewed by the Ohio EPA as part of the renewal process for your Ohio hazardous waste permit application.

Ohio regulations provide up to six months for submittal of the Part B permit application, you are requested to submit the Part B within six months of the date of this letter in order to expedite the review of your application and the issuance of a final determination of the Director or of the Hazardous Waste Facility Board, as appropriate. Please submit two copies of the Part B as follows:

Ohio EPA
Division of Solid and Hazardous Waste Management
Program Planning and Management Section
1800 WaterMark Drive
P.O. Box 1049
Columbus, Ohio 43266-0149

If you have submitted a Part B application to Ohio and US EPA under federal requirements and you do not wish to provide additional information, Ohio EPA will use the Part B that is on file for review. Please inform this office if the file copy is to be used. However, all applicants are required to submit a completed checklist as explained in the following paragraph.

Attached you will find a checklist of information to be included in a Part B application which cross-references 40 CFR 270 and 264 regulations with Rules 3745-50 to 3475-69 of the Ohio Administrative Code. Please complete this checklist stating precisely on which page(s), figure(s), etc. of your application each applicable Ohio rule has been addressed. If a rule is not applicable to your facility, please so indicate on the checklist.

If you have questions regarding the contents of this letter, or need additional guidance, please contact either Ed Lim, (614) 481-7239, or Thomas E. Crepeau, (614) 481-7217, of the Division of Solid and Hazardous Waste Management.

Sincerely,

Richard L. Shank

Richard L. Shank, Ph.D.
Director

RLS/RR/ep
2122R/10-11

Attachment

cc: SEDO

Allied Corporation
Chemical Sector
P.O. Box 1053R
Morristown, NJ 07960-1053

July 2, 1985

CERTIFIED MAIL

U.S. EPA
Region V
RCRA Activities
P.O. Box 7861
Chicago, IL 60680

Dear Sir: OHD 043730217 O, TSD, PA, 9

Enclosed please find our amended Part A Permit Application for Allied's Ironton, Ohio facility OHD 043730217.

This filing is made pursuant to requirements, as published in 50FR January 4, 1985 on Page 614.

Sincerely,

C. L. Davidson

C. L. Davidson
Plant Manager

enc.

Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.

NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

PLEASE PLACE LABEL IN THIS SPACE

RECEIVED
APR 10 1985
WMD-RAIU
EPA REGION V

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law *(Section 3010 of the Resource Conservation and Recovery Act).*

DETACH

FOR OFFICIAL USE ONLY

COMMENTS: C

INSTALLATION'S EPA I.D. NUMBER	APPROVED	DATE RECEIVED (yr., mo., & day)
F OHD043730217 T/A C 1		

I. NAME OF INSTALLATION

ALLIED CORPORATION IRONTON TAR PLANT

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: 3330 SOUTH THIRD STREET

CITY OR TOWN	ST.	ZIP CODE
IRONTON	OH	45638

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: 3330 SOUTH THIRD STREET

CITY OR TOWN	ST.	ZIP CODE
IRONTON	OH	45638

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)	PHONE NO. (area code & no.)
DAVIDSON C L PLANT MANAGER	614-533-1040

V. OWNERSHIP

DETACH

A. NAME OF INSTALLATION'S LEGAL OWNER: ALLIED CORPORATION

B. TYPE OF OWNERSHIP (enter the appropriate letter into box): M

F = FEDERAL
M = NON-FEDERAL

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

- [X] A. GENERATION
- [ ] B. TRANSPORTATION (complete item VII)
- [X] C. TREAT/STORE/DISPOSE
- [ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only – enter "X" in the appropriate box(es))

- [ ] A. AIR
- [ ] B. RAIL
- [ ] C. HIGHWAY
- [ ] D. WATER
- [ ] E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

- [ ] A. FIRST NOTIFICATION
- [X] B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.: OHD043730217

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

I.D. – FOR OFFICIAL USE ONLY

S												T/A	C
W													1
1	2									13	14	15	

IX. DESCRIPTION OF HAZARDOUS WASTES *(continued from front)*

A. HAZARDOUS WASTES FROM NON–SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.31 for each listed hazardous waste from non–specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F003	F004				
7	**8**	**9**	**10**	**11**	**12**

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
K035	K001	K087			
19	**20**	**21**	**22**	**23**	**24**
25	**26**	**27**	**28**	**29**	**30**

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four–digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
U051		U165			
37	**38**	**39**	**40**	**41**	**42**
43	**44**	**45**	**46**	**47**	**48**

D. LISTED INFECTIOUS WASTES. Enter the four–digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. CHARACTERISTICS OF NON–LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non–listed hazardous wastes your installation handles. *(See 40 CFR Parts 261.21 – 261.24.)*

[X] 1. IGNITABLE (D001)	[ ] 2. CORROSIVE (D002)	[ ] 3. REACTIVE (D003)	[X] 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE *(type or print)*	DATE SIGNED
C L Davidson	C. L. Davidson, Plant Manager	Mar. 22, 1985

DETACH

DETACH

A-

EPA

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act *(RCRA)*. Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

OHD043730217 REACKNOWLEDGEMENT

ALLIED CHEMICAL CORP IRONTON TAR PLANT
3330 SOUTH THIRD STREET
IRONTON OH 45638

INSTALLATION ADDRESS

3330 SOUTH THIRD STREET
IRONTON OH 45638

EPA Form 8700-12B (4-80)

09/29/81

Please print or type with ELITE type *(12 characters/inch)* in the unshaded areas only.

Form Approved OMB No. 158-S79016
GSA No. 0246-EPA-OT

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law *(Section 3010 of the Resource Conservation and Recovery Act).*

INSTALLATION'S EPA I.D. NO.: OHD043730217

I. NAME OF INSTALLATION: ALLIED CHEMICAL CORP

II. INSTALLATION MAILING ADDRESS: ~~PO BOX 96~~ IRONTON, OH ~~45638~~

III. LOCATION OF INSTALLATION: ~~3330~~ S THIRD STREET IRONTON, OH ~~45638~~

00049.1 AUG 12 80

DETACH

FOR OFFICIAL USE ONLY

COMMENTS: C

INSTALLATION'S EPA I.D. NUMBER	APPROVED	DATE RECEIVED (yr., mo., & day)
F CHD043730217 T/A C 1	A	800812

I. NAME OF INSTALLATION

ALLIED CHEMICAL CORP IRONTON TAR PLANT

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: 3 3330 SOUTH THIRD STREET

CITY OR TOWN: 4 IRONTON — ST.: OH — ZIP CODE: 45638

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: 5 3330 SOUTH THIRD STREET

CITY OR TOWN: 6 IRONTON — ST.: OH — ZIP CODE: 45638

IV. INSTALLATION CONTACT

NAME AND TITLE *(last, first, & job title)*: 2 DAVIDSON CHARLES PLANT MANAGER

PHONE NO. *(area code & no.)*: 614-533-1040

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: 8 ALLIED CHEMICAL CORPORATION

B. TYPE OF OWNERSHIP *(enter the appropriate letter into box)*: M

F = FEDERAL
M = NON-FEDERAL

VI. TYPE OF HAZARDOUS WASTE ACTIVITY *(enter "X" in the appropriate box(es))*

- [X] A. GENERATION
- [ ] B. TRANSPORTATION *(complete item VII)*
- [X] C. TREAT/STORE/DISPOSE
- [ ] D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION *(transporters only – enter "X" in the appropriate box(es))*

- [ ] A. AIR
- [ ] B. RAIL
- [ ] C. HIGHWAY
- [ ] D. WATER
- [ ] E. OTHER *(specify):*

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

- [X] A. FIRST NOTIFICATION
- [ ] B. SUBSEQUENT NOTIFICATION *(complete item C)*

C. INSTALLATION'S EPA I.D. NO.: OHD043730217

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

AUG 12 1980

CONTINUE ON REVERSE

I.D. – FOR OFFICIAL USE ONLY

S													T/A	C
W	O	H	D	0	4	3	7	3	0	2	1	7	2	1
1	2											13	14	15

IX. DESCRIPTION OF HAZARDOUS WASTES *(continued from front)*

A. HAZARDOUS WASTES FROM NON–SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.31 for each listed hazardous waste from non–specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F003					
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four–digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
K035					
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four–digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
U051	U057	U165			
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four–digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. CHARACTERISTICS OF NON–LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non–listed hazardous wastes your installation handles. *(See 40 CFR Parts 261.21 – 261.24.)*

☐ 1. IGNITABLE (D001) ☐ 2. CORROSIVE (D002) ☐ 3. REACTIVE (D003) ☐ 4. TOXIC (D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE *(type or print)*	DATE SIGNED
C L Davidson	C. L. DAVIDSON PLANT MANAGER	Aug. 5, 1980

Allied Signal

Allied-Signal Inc.
Engineered Materials Sector
Ironton Tar Processing Plant
3330 South Third Street
Ironton, OH 45638
Telephone (614) 533-1040

January 20, 1989

RCRA Activities
U.S. EPA - Region V
ATTN: Lisa Picrard - 5 HR-14
Post Office Box a - 3587
Chicago, IL 60690-3587

Dear Ms. Picrard:

As per the request of Anita Boseman on December 30, 1988, we are submitting a revised Part A application and explanation regarding the following process codes.

PROCESS CODES	CAPACITY	COMMENTS
S02	12,200 GALS	This storage tank was closed according to our Closure Plan which was certified April 27, 1984, and has been omitted from the attached Part A application. In addition, a July 1985, Part A application was revised regarding a capacity increase from 12,200 to 150,000 gallons. This was only proposed and has also been eliminated from the attached application.
T01	20,000 GPD	We currently have no treatment regarding this process code which was initially proposed in July 1985. This treatment code was omitted on a revised Part A application of January 10, 1986.
S01	6,000 GALS	A Closure Plan was submitted October 5, 1988, for this process waste container which will be managed for <90 day storage after closure.

Please note that we have requested a withdrawal of our Part A application pending closure of the S01 process waste container. If there are any questions, please call us at (614) 533-1040.

Sincerely,

R. L. Haley
Plant Manager

RLH/skg
Enclosure

cc: Ohio EPA
Division of Solid & Hazardous Waste Mgmt
Program Planning & Mgmt. Section
ATTN: Mr. Thomas E. Crepeau
1800 Watermark Drive
P. O. Box 1049
Columbus, OH 43266

Ohio EPA
ATTN: Mr. Michael Moschell
2195 Front Street
Logan, OH 43138

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-R0175

FORM 1 GENERAL — EPA — U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F OHD043730217 D

LABEL ITEMS

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold-faced terms**.

SPECIFIC QUESTIONS	YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.**? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to **waters of the U.S.**? (FORM 2B)		X	
C. Is this a facility which currently results in **discharges** to **waters of the U.S.** other than those described in A or B above? (FORM 2C)	X		
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to **waters of the U.S.**? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)	X		
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP ALLIED-SIGNAL INC. IRONTON TAR PLANT

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*
HALEY R.L. PLANT MANAGER	614 533 1040

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3330 SOUTH THIRD STREET

B. CITY OR TOWN	C. STATE	D. ZIP CODE
IRONTON	OH	45638

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

3330 SOUTH THIRD STREET

B. COUNTY NAME

LAWRENCE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE *(if known)*
IRONTON	OH	45638	044

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2865 (specify) COAL TAR CYCLIC CRUDES AND CYCLIC INTERMEDIATES	(specify)
C. THIRD	**D. FOURTH**
(specify)	(specify)

VIII. OPERATOR INFORMATION

A. NAME: ALLIED-SIGNAL INC.

B. Is the name listed in Item VIII-A also the owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)

P (specify)

D. PHONE (area code & no.): A 201 455 2000

E. STREET OR P.O. BOX: COLUMBIA ROAD & PARK AVENUE

F. CITY OR TOWN: MORRISTOWN

G. STATE: NJ

H. ZIP CODE: 07960

IX. INDIAN LAND

Is the facility located on Indian lands? [ ] YES [X] NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water): 9 N OH0007544	**D. PSD** (Air Emissions from Proposed Sources): 9 P
B. UIC (Underground Injection of Fluids): 9 U	**E. OTHER** (specify): 9 074401002 (specify) STATE AIR PERMIT APPLICATION
C. RCRA (Hazardous Wastes): 9 R OHD043730217	**E. OTHER** (specify): 9 OIF00014*CD (specify) STATE NPDES PERMIT

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

MANUFACTURER OF INDUSTRIAL ORGANIC CHEMICALS, SPECIFICALLY CYCLIC COAL TAR CRUDES AND INTERMEDIATES. PRINCIPAL PRODUCTS ARE COAL TAR PITCH, REFINED COAT TARS, NAPHTHALENE AND CREOSOTE OILS

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
G. H. COLLINGWOOD, VICE PRESIDENT	A H Collingwood	4/11/88

COMMENTS FOR OFFICIAL USE ONLY

C

1000 0 1000 2000 3000 4000 5000 6000 7000 FEET

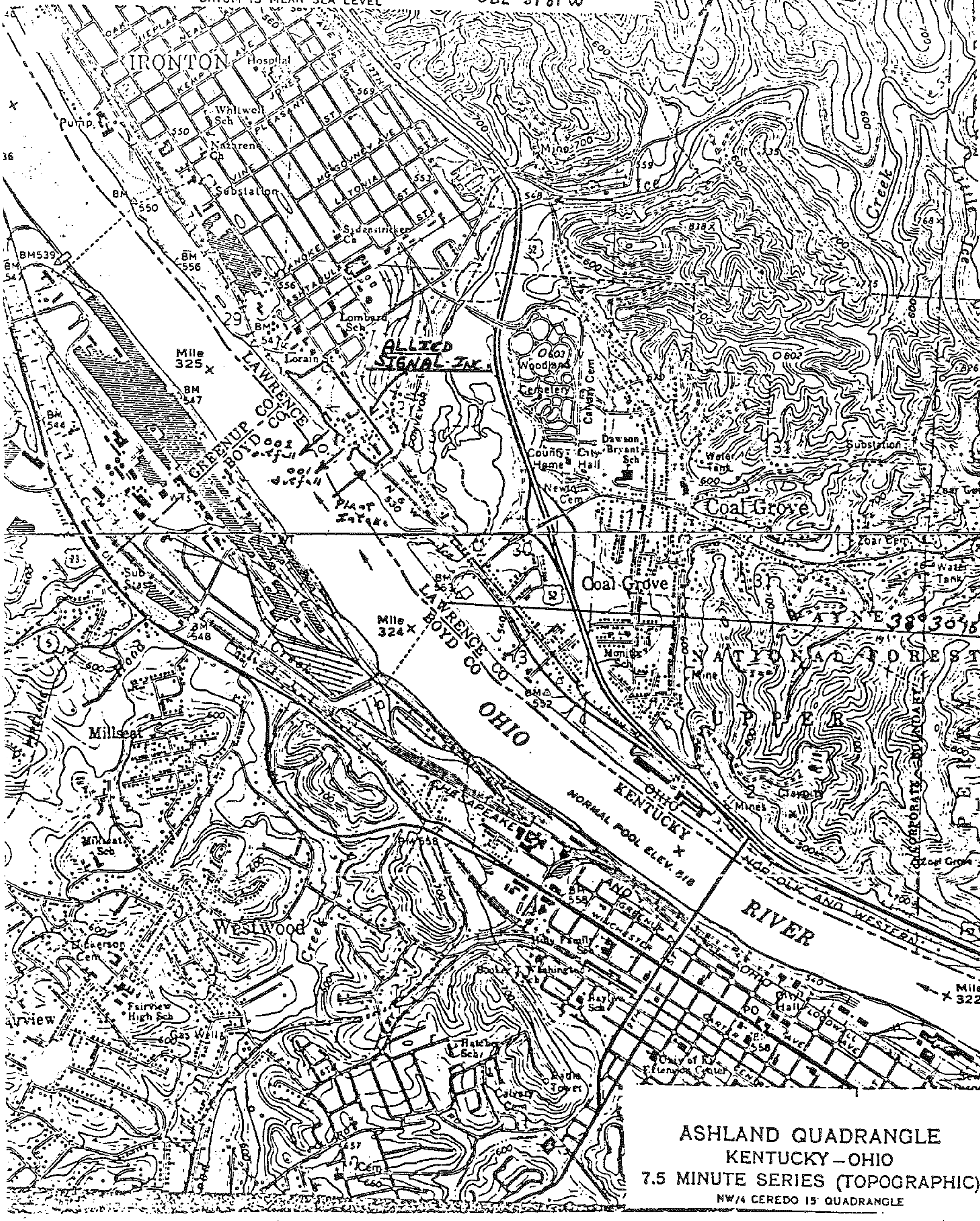
1 .5 0 1 KILOMETER

1 MILE

CONTOUR INTERVAL 20 FEET
DOTTED LINES REPRESENT 10-FOOT CONTOURS
DATUM IS MEAN SEA LEVEL

38° 30' 16" N
082° 39' 51' W

IRONTON 15' QUADRANGLE
N3830—W8237.5/7.5
1972
AMS 4461 II SW—SERIES V852



ASHLAND QUADRANGLE
KENTUCKY—OHIO
7.5 MINUTE SERIES (TOPOGRAPHIC)
NW/4 CEREDO 15' QUADRANGLE

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

FORM 3 RCRA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

S													T/A	C
F	0	H	D	0	4	3	7	3	0	2	1	7		1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

☐ 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

C	YR.	MO.	DAY
8	5 0	0 0	0 0

☐ 2. NEW FACILITY *(Complete item below.)*

FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

☐ 1. FACILITY HAS INTERIM STATUS

☒ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

S													T/A	C
C	D	U	P											1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S 0 2	600	G		5				
X-2	T 0 3	20	E		6				
1	S 0 1	6,000	G		7				
2					8				
3					9				
4					10				

Continued from the front.

III. PROCESSES *(continued)*

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES *(code "T04")*. FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER – Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number*(s)* from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY – For each **listed waste** entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each **characteristic** or **toxic contaminant** entered in column A estimate the total annual quantity of all the non–listed waste*(s)* that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:
   For listed hazardous waste: For each **listed** hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process codes contained in Item III to indicate **all** the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Continued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)															FOR OFFICIAL USE ONLY													
S													T/A	C	S											T/A	C	
W	0	H	D	0	4	3	7	3	0	2	1	7		1	W	D	U	P									2	DUP
1	2											13	14	15	1	2							13	14	15	23		26	

DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
	23 - 26	27 - 35	36	27 - 29 / 27 - 29 / 27 - 29 / 27 - 29	
1	F003	200	T	S01	
2	F004	200	T	S01	
3	K035	500	T	S01	
4	K001	5,000	T	S01	
5	K087	5,000	T	S01	
6	U051	1,000	T	S01	
7	U165	200	T	S01	
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

(enter "A", "B", "C", etc. behind the "3" to identify photocopied pages)

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WA[illegible] *(continued)*

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. *(enter from page 1)*

F | O H D 0 4 3 7 3 0 2 1 7 | T/A | 6

V. FACILITY DRAWING

All **existing** facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).*

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground–level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).*

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE *(degrees, minutes, & seconds)*	LONGITUDE *(degrees, minutes, & seconds)*
38 30 15 N	082 39 51 W

VIII. FACILITY OWNER

[x] A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. *(area code & no.)*
E	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F	G		

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
G. H. COLLINGWOOD, VICE PRESIDENT	G H Collingwood	4/11/89

X. OPERATOR CERTIFICATION

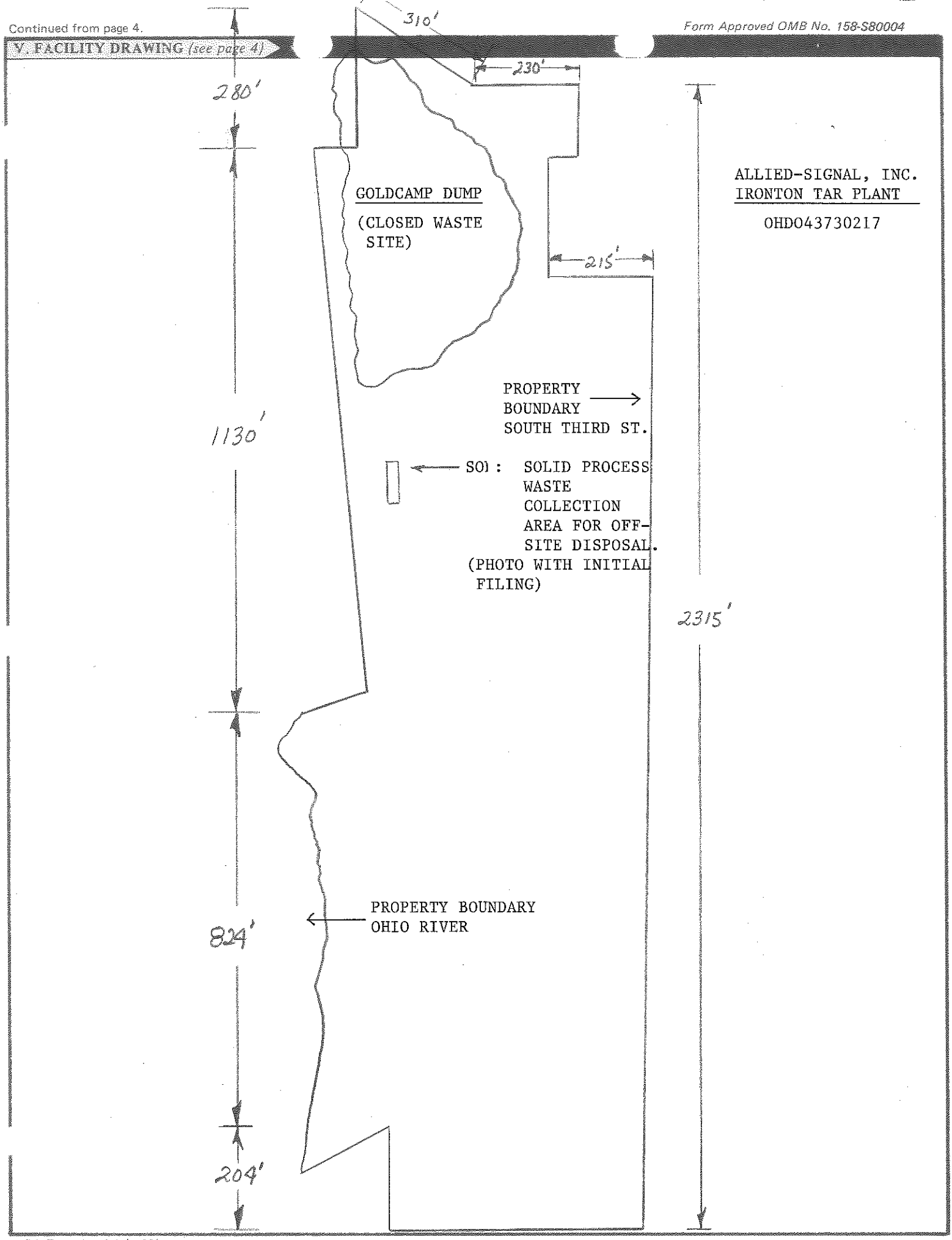
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED

Continued from page 4.

Form Approved OMB No. 158-S80004

V. FACILITY DRAWING *(see page 4)*



Allied-Signal Inc.
Engineered Materials Sector
Ironton Tar Processing Plant
3330 South Third Street
Ironton, OH 45638
Telephone (614) 533-1040

October 5, 1988

RCRA Activities
U.S. EPA - Region V
Post Office Box A - 3587
Chicago, IL 60690-3587

ATTN: 5HR-13

RE: Withdrawal of Part A Application
Allied-Signal, Inc.
OHDO43730217

Dear Sir:

On June 24, 1988 we submitted a request for withdrawal of our RCRA Part A permit application to U. S. EPA Region V and Ohio EPA Division of Solid and Hazardous Waste Management. Per your response we are submitting a closure plan for our hazardous waste storage area for approval. Please note that even though we will close our containerized storage area for purposes of reclassification to generator status only, we will continue to use it to store hazardous waste for less than 90 days and process waste for recycle. We can demonstrate that hazardous waste has not been stored on-site for longer than 90 days and off-site waste has not been received at any time since the initial filing.

Sincerely,

R. L. Haley
Plant Manager

RLH/skg
Enclosure

cc: Ohio EPA
2195 Front Street
Logan, OH 43138
ATTN: M. Moschell

Technical Assistance & Engineering Section
Divison of Solid & Hazardous Waste Mgn.
Ohio EPA
P. O. Box 1049
Columbus, OH 43266-1049

5HR-13

AUG 30 1988

R. L. Haley
Plant Manager
Allied-Signal, Incorporated
3303 South 3rd Street
Ironton, Ohio 45638

Re: Withdrawal of Part A Application
Allied-Signal, Incorporated
OHD 043 730 217

Dear Mr. Haley:

This is in response to your letter of July 11, 1988, requesting the withdrawal of the Part A Hazardous Waste Permit Application for the above-referenced facility. The request stated that the facility would liked to be considered a generator of hazardous waste only, and accumulate those wastes on-site for fewer than 90 days according to 40 CFR §262.34.

Based on the Agency's information, however, the facility was issued a Hazardous Waste Installation and Operation Permit by the Ohio Environmental Protection Agency. Therefore, the facility is subject to the closure requirements in 40 CFR §265 Subpart G and subject to the Hazardous and Solid Waste Amendments of 1984.

Two copies of the closure plan should be submitted to each of the following offices:

RCRA Activities
U. S. EPA - Region V
Post Office Box A-3587
Chicago, Illinois 60690-3587

Ohio Environmental Protection Agency
Southeast District Office
2195 Front Street
Logan, Ohio 43138

Technical Assistance and Engineering Section
Division of Solid and Hazardous Waste Management
Ohio Environmental Protection Agency
Post Office Box 1049
Columbus, Ohio 43266-1049

If you have any questions, contact Ms. Anita L. Boseman of my staff, at (312) 353-4734.

Sincerely,

ORIGINAL SIGNED BY/
KARL E. BREMER

Karl E. Bremer, Chief
RCRA Permitting Branch

cc: Ed Kitchen, OEPA-DSHWM
Mike Moschell, OEPA-SEDO

5HR:BOSEMAN:bd:8/25/88

RCRA PERMITS	TYP.	AUTH.	IL. CHIEF	IN. CHIEF	MI. CHIEF	MN/WI CHIEF	OH. CHIEF	RPB CHIEF	O. R. A.D.D.	WMD DIR
INIT. DATE	8/26/88	8/26/88						8/30/88		

Please print or type in the unshaded areas
(fill—in areas are spaced for elite type, i.e., charac /inch).

Form Approved OMB No. 158-R0175

FORM 1 GENERAL — EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F 0 H D 0 4 3 7 3 0 2 1 7

LABEL ITEMS

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill—in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill—in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold—faced terms.**

SPECIFIC QUESTIONS	YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.?** (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge to waters of the U.S.?** (FORM 2B)		X	
C. Is this a facility which currently results in **discharges** to **waters of the U.S.** other than those described in A or B above? (FORM 2C)	X		Note
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to **waters of the U.S.?** (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of **hazardous wastes?** (FORM 3)	X		X
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area?** (FORM 5)		X	
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area?** (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP Allied-Signal Inc., Ironton Tar Plant

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
Haley, R. L., Plant Manager	614 533 1040

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX: 3330 South Third Street

B. CITY OR TOWN	C. STATE	D. ZIP CODE
Ironton	OH	45638

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER: 3330 South Third Street

B. COUNTY NAME: Lawrence

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
Ironton	OH	45638	044

EPA Form 3510-1 (6-80) Note: Form 2C submitted to SUPO 12-3-80

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2865 (specify) Cyclic (Coal Tar) Crudes and Cyclic intermediates	(specify)
C. THIRD	**D. FOURTH**
(specify)	(specify)

VIII. OPERATOR INFORMATION

A. NAME

Allied-Signal Inc. Ironton Tar Plant

B. Is the name listed in Item VIII-A also the owner? ☒ YES ☐ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL, S = STATE, P = PRIVATE, M = PUBLIC (other than federal or state), O = OTHER (specify)

P (specify)

D. PHONE (area code & no.) A 614 533 1040

E. STREET OR P.O. BOX

3330 South Third Street

F. CITY OR TOWN	G. STATE	H. ZIP CODE
Ironton	OH	45638

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	**D. PSD** (Air Emissions from Proposed Sources)
9 N OH0007544	9 P
B. UIC (Underground Injection of Fluids)	**E. OTHER** (specify)
9 U	9 OIF00014*CD (specify) OEPA Discharge Permit No.
C. RCRA (Hazardous Wastes)	**E. OTHER** (specify)
9 R 04-44-0059	9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Manufacture of industrial organic chemicals, specifically cyclic coal tar crudes and intermediates. Principal products are coal tar pitch, refined coal tars, naphthalene, and creosote oils.

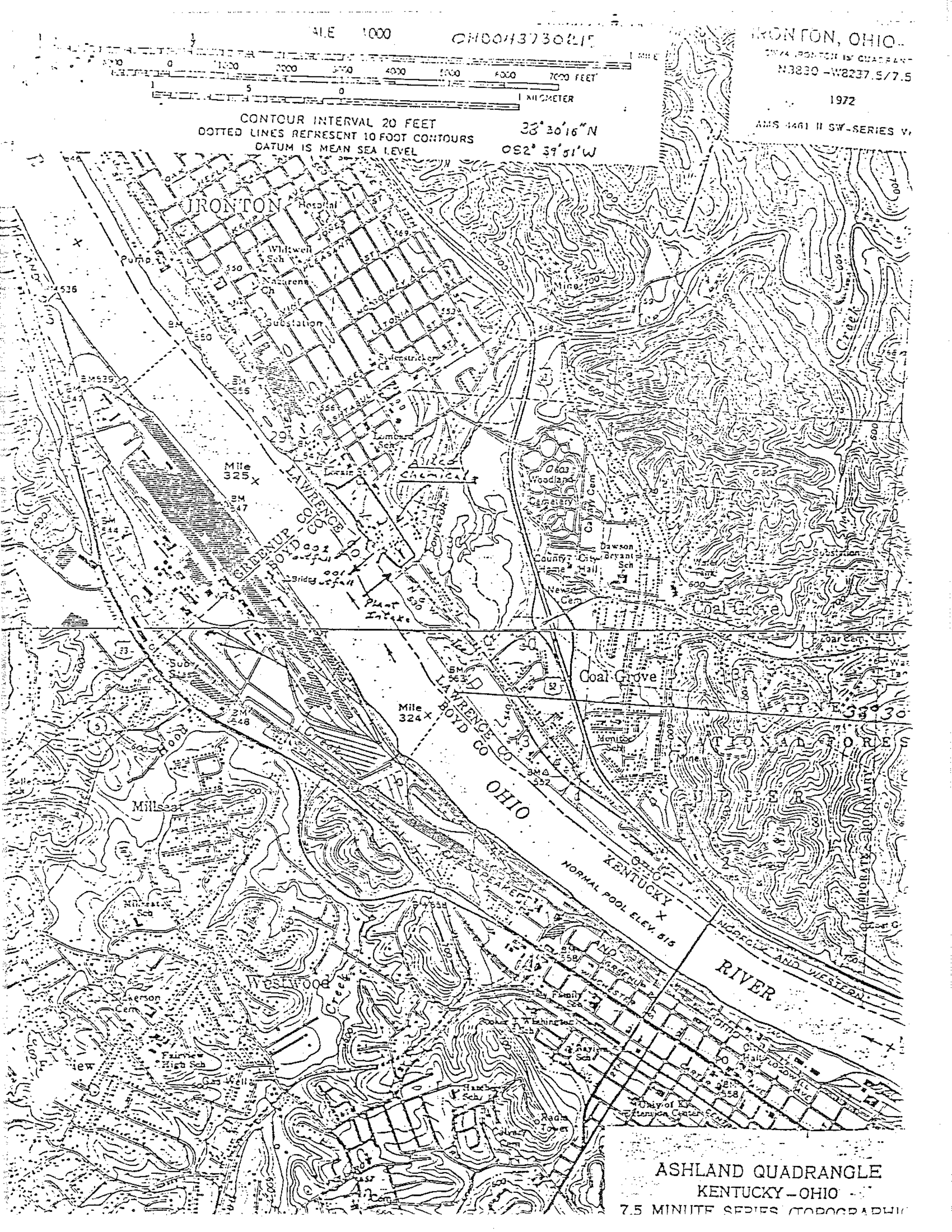
XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
R. L. Haley Plant Manager	R. L. Haley	2/26/86

COMMENTS FOR OFFICIAL USE ONLY

C


CH00H3730815
IRONTON, OHIO
N3830 -W8237.5/7.5
1972
AMS 4461 II SW-SERIES V
1000 FEET
0 1000 2000 3000 4000 5000 6000 7000 FEET
1 KILOMETER
CONTOUR INTERVAL 20 FEET
DOTTED LINES REPRESENT 10 FOOT CONTOURS
DATUM IS MEAN SEA LEVEL
38°30'16"N
082°39'51"W
IRONTON
Hospital
Whitwell Sch
Nazarene Ch
Substation
Pump
Sydenstricker Ch
Lombard Sch
Lorain
Allied Chemical
Mile 325
Mile 324
LAWRENCE CO
BOYD CO
GREENUP CO
002 outfall
001 outfall
Plant Intake
Bridge
Conveyor
Mine
Woodland Cemetery
Calvary Cem
Dawson Bryant Sch
County Home
City Hall
Newman Cem
Coal Grove
Monitor Sch
Substation
Water Tank
NATIONAL FORES
OHIO
KENTUCKY
NORMAL POOL ELEV. 515
RIVER
NORFOLK AND WESTERN
CHESAPEAKE
Millseat
Hood Creek
Westwood
Fairview High Sch
Gas Wells
Booker T Washington Sch
Radio Tower
Calvary Cem
Univ of Ky Extension Center
ASHLAND QUADRANGLE
KENTUCKY-OHIO
7.5 MINUTE SERIES (TOPOGRAPHIC)

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004

FORM 3 RCRA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER: F H D 0 4 3 7 3 0 2 1 7

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

- [ ] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*
- [X] 2. NEW FACILITY *(Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

C | YR. 50 | MO. 00 | DAY 00

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR. | MO. | DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

- [ ] 1. FACILITY HAS INTERIM STATUS
- [X] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES — CODES AND DESIGN CAPACITIES

A. PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

1. AMOUNT — Enter the amount.
2. UNIT OF MEASURE — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C DUP

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S02	600	G		5				
X-2	T03	20	E		6				
	S01	6,000	G		7				
2	S02	12,200	G		8				
3			U		9				
4					10				

Continued from the front.

III. PROCESSES *(continued)*

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES *(code "T04")*. FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. **EPA HAZARDOUS WASTE NUMBER** – Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number*(s)* from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. **ESTIMATED ANNUAL QUANTITY** – For each **listed waste** entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each **characteristic** or **toxic contaminant** entered in column A estimate the total annual quantity of all the non–listed waste*(s)* that will be handled which possess that characteristic or contaminant.

C. **UNIT OF MEASURE** – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE
POUNDS	P
TONS	T

METRIC UNIT OF MEASURE	CODE
KILOGRAMS	K
METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. **PROCESSES**

1. PROCESS CODES:
   For listed hazardous waste: For each **listed** hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. *(enter code)*	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE *(enter code)*	D. PROCESSES 1. PROCESS CODES *(enter)*	D. PROCESSES 2. PROCESS DESCRIPTION *(if a code is not entered in D(1))*
X-1	K054	900	P	T03 D80	
X-2	D002	400	P	T03 D80	
X-3	D001	100	P	T03 D80	
X-4	D002				*included with above*

Continued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)	FOR OFFICIAL USE ONLY
V 0 H D 0 4 3 7 3 0 2 1 7 — T/A: 1 — C	W DUP — T/A: 2 — C DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	F003	200	T	S01 S02	
2	F004	200	T	S01 S02	
3	K035	500	T	S01 S02	
4	K001	5,000	T	S01 S02	
5	K087	5,000	T	S01 S02	
6	U051	1,000	T	S01 S02	
7	U165	200	T	S01 S02	
8					
9					
10					
11					
12					
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19					
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22					
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24					
25					
26					

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTES *(continued)*

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. *(enter from page 1)*

F | O | H | D | 0 | 4 | 3 | 7 | 3 | 0 | 2 | 1 | 7 | | 6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).*

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground—level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).*

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE *(degrees, minutes, & seconds)*	LONGITUDE *(degrees, minutes, & seconds)*
38 30 15 N	082 39 51 W

VIII. FACILITY OWNER

[X] A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. *(area code & no.)*
E	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F	G		

IX. OWNER CERTIFICATION

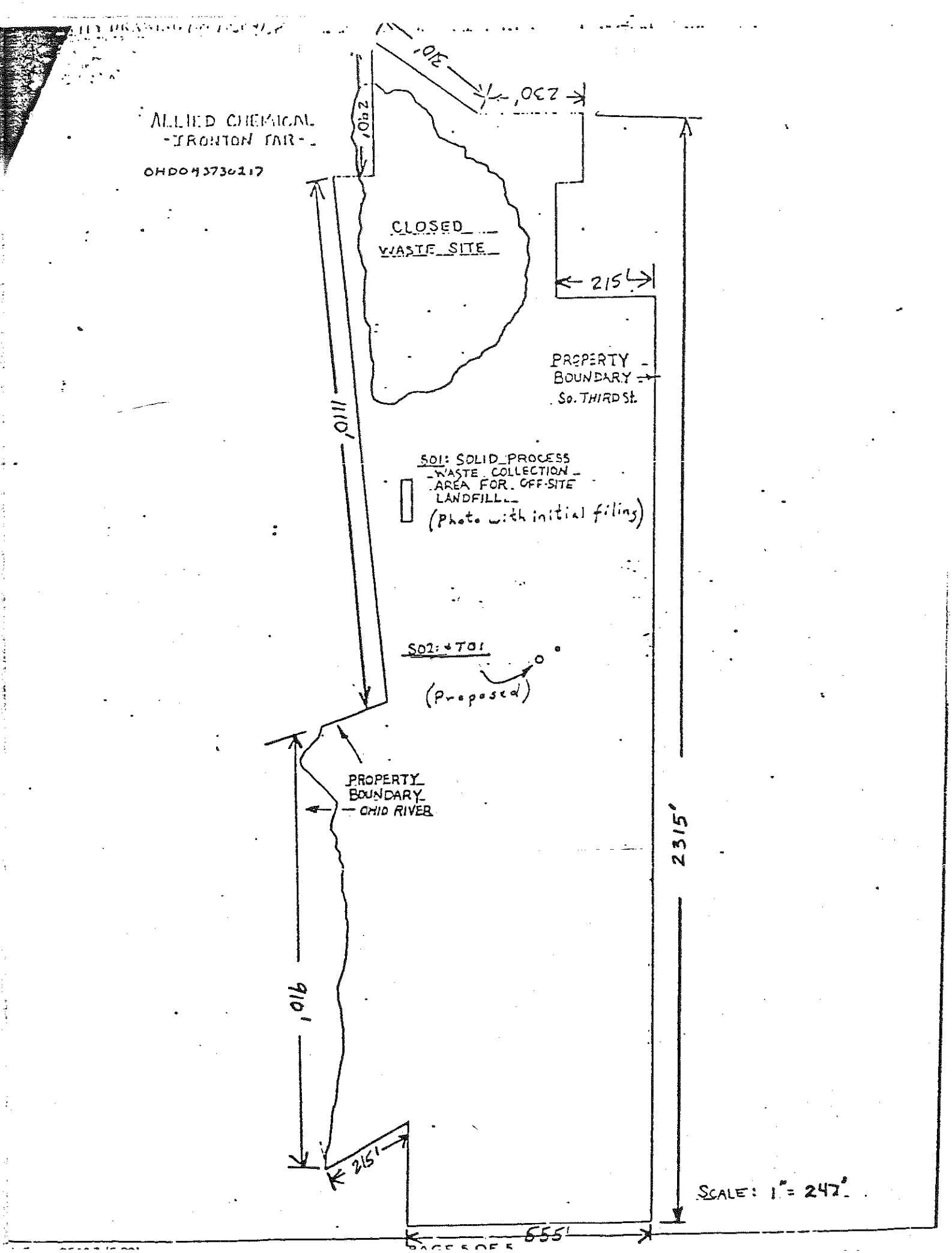
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
R. L. Haley	R. L. Haley	1-10-86

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED


ALLIED CHEMICAL
-IRONTON FAIR-
OHD093736217
1082
230'
1062
CLOSED
WASTE SITE
215'
PROPERTY
BOUNDARY
So. THIRD St.
1111'
S01: SOLID PROCESS
WASTE COLLECTION
AREA FOR OFF-SITE
LANDFILL
(Photo with initial filing)
S02: ◆ T01
(Proposed)
PROPERTY
BOUNDARY
OHIO RIVER
1016'
215'
2315'
SCALE: 1" = 247'
655'

Continued from page 2

S	EPA I.D. NUMBER	T/A	C	S		T/A	C	
W	0HD043730217		1	W	DUP		2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES *(continued)*

LINE NO.	A. EPA HAZARD. WASTE NO. *(enter code)*	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE *(enter code)*	D. PROCESSES 1. PROCESS CODES *(enter)*				D. PROCESSES 2. PROCESS DESCRIPTION *(if a code is not entered in D(1))*
1	F003	200	T	S01	S02			
2	F004	200	T	S01	S02			
3	K035	500	T	S01	T01	S02		
4	K001	5,000	T	S01	T01	S02		
5	K087	5,000	T	S01	T01	S02		
6	U051	1,000	T	S01	T01	S02		
7	U165	200	T	S01	S02			
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amended page of revised Part A of 7/2/85

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

Allied Chemical

P.O. Box 1053R
Morristown, New Jersey 07960

April 5, 1982

Mr. Paul Lewandowski
RCRA Activities
EPA Region V
P.O. Box A 3587
Chicago, ILL 60690

Dear Mr. Lewandowski:

SUBJECT: Application for a Hazardous Waste Permit, EPA I.D. No.: OHD043730217 g, TSD, PA

In response, through your request to Mr. H. Simon of our Ironton, Ohio plant, find enclosed a copy of our correspondence with your Mr. Ihsan Eler concerning inclusion of a "proposed" waste on our Part A permit application. The correspondence is self-explanatory and we trust the appropriate modifications were made.

In the matter of waste descriptions, it is our understanding that your use of one hazardous waste to identify a multiple waste process grouping, for purposes of data collection, will not modify our initial application or result in omissions in any permit which may be issued.

If you require any additional information, please feel free to call either Mr. Simon, or this office at 201-455-4767.

Yours truly,

F. Bohn

Finn Bohn
Environmental Engineer

Tar Products

FB/bg
enc.
cc: Mr. H. Simon - with enc.

Allied
Chemical

P.O. Box 1053R
Morristown New Jersey 07960

July 29, 1981

CERTIFIED MAIL

bcc: A. H. Baker
E. F. Bart
W. M. Reiter
R. Sobel
G. D. Van Epps

Mr. Ihsan Eler
Waste Management Branch
U.S. Environmental Protection Agency
Region V
Mail Code 5 AHWM
230 South Dearborne Ave.
Chicago, ILL 60604

RECEIVED
JUL 31 1981
E. F. BART

Dear Mr. Eler:

Subject: Application for a Hazardous Waste Permit
EPA I.D. No.: OHD043730217

In response to our phone conversation and your phone communication with our Ironton, Ohio plant manager, Mr. C. L. Davidson on 7/29/81, the following information is provided in answer to your questions regarding our Part A Hazardous Waste Permit application.

Our reference to, and inclusion of, "process waste water from creosote production" on the subject permit application was made in anticipation of the promulgation of the proposed amendment to 40 CFR 261.32 listing this material as a hazardous waste (FR May 19, 1980, pages 33136-33137)

Since this amendment was not promulgated, and in order to facilitate process of our application, please omit the following items from our application:

- pg. 1 Part III line 3 *See pg. 2 14,800 U
- pg. 1 Part III line 4 *See pg. 2 187,000 G
- pg. 2 Part III under space for additional process codes ...

*Proposed "process waste water from creosote production." Proposed supplemental listing of hazardous wastes 40 CFR Part 261(8), includes T01 of 14,800 gal./day.

- pg. 3 Part IV line 6 *Proposed Waste
18,750 T S02 T01 *See page 2 comments

The attached copy of our application identifies those deletions described above.

Very truly yours,

Finn Bohn
Environmental Engineer
Tar Products Department

FB/bg
enc.
cc: C. L. Davidson

99

Allied Chemical

Chemicals Company
Environmental Affairs Department
P.O. Box 1139R
Morristown, New Jersey 07960

November 14, 1980

EPA Region V
RCRA Activities
P. O. Box 7861
Chicago, IL 60680

Subject: RCRA Permit Application (Part A)
Allied Chemical Ironton Plant
EPA ID #OHD043730217

Dear Sir:

Pursuant to 40 CFR Part 122, we herewith submit the subject permit application including Forms 1 and 3.

The process listing in Form 3, Section III is based on our interpretation of the RCRA regulations and the EPA Guide to the Regulations, and in some cases on discussions with EPA personnel.

The description of hazardous wastes listed in Form 3, Section IV is understood to be a current representation of our operations. However, such description may change as a result of alternate use or variation in raw materials, reagents, treating agents and/or manufacturing process variations.

The facility drawing for Form 3, Section V is our collective recollection at the present time regarding areas of past storage, treatment or disposal operations. We reserve all legal and other rights concerning this matter because of the considerable passage of time since the facility began operations.

If you have any questions about this application, please call the facility contact listed in Form 1.

Very truly yours,

R. Sobel

R. Sobel, Director
Environmental Control

RS/jp

NOV 14 1980

Please print or type in the unshaded areas only
(fill-in areas are spaced for elite type, i.e., 12 ch. /inch).

Form Approved OMB No. 158-R0175

99

FORM 1 GENERAL

EPA

ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F: O H D 0 4 3 7 3 0 2 1 7 | 3 | D

LABEL ITEMS

II. EPA I.D. NUMBER	OHD043730217
III. FACILITY NAME	~~ALLIED CHEMICAL CORP~~
V. FACILITY MAILING ADDRESS	~~PO BOX 97~~ IRONTON, OH 45638
VI. FACILITY LOCATION	~~3329 S THIRD STREET~~ IRONTON, OH 45638

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold-faced terms.**

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.**? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to **waters of the U.S.**? (FORM 2B)		X	
C. Is this a facility which currently results in **discharges** to **waters of the U.S.** other than those described in A or B above? (FORM 2C)	X		NOTE
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to **waters of the U.S.**? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)	X		X
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP: ALLIED CHEMICAL CORP IRONTON TAR PLANT

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*
2 DAVIDSON Charles L PLANT MANAGER	614 533 1040

FTS 293313

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	B. CITY OR TOWN	C. STATE	D. ZIP CODE
3 3330 SOUTH THIRD STREET	4 IRONTON	OH	45638

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	B. COUNTY NAME
5 3330 SOUTH THIRD STREET	LAWRENCE

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE *(if known)*
6 IRONTON	OH	45638	087

EPA Form 3510-1 (6-80)

NOTE: FORM 2C WILL BE SUBMITTED LATER.

NOV 14 1980

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2865 (specify) Cyclic (coal tar) crudes and cyclic intermediates	(specify)

C. THIRD	D. FOURTH
(specify)	(specify)

VIII. OPERATOR INFORMATION

A. NAME: ALLIED CHEMICAL CORPORATION

B. Is the name listed in Item VIII-A also the owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL, S = STATE, P = PRIVATE, M = PUBLIC (other than federal or state), O = OTHER (specify)
P (specify)

D. PHONE (area code & no.): 614 533 1040

E. STREET OR P.O. BOX: 3330 SOUTH STREET

F. CITY OR TOWN: IRONTON

G. STATE: OH

H. ZIP CODE: 45638

IX. INDIAN LAND

Is the facility located on Indian lands? [ ] YES [X] NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
9 N OH0007544	9 P

B. UIC (Underground Injection of Fluids)	E. OTHER (specify)	(specify)
9 U	9 Z F014*BD	State Discharge Permit

C. RCRA (Hazardous Wastes)	E. OTHER (specify)	(specify)
9 R	9	

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements. F9:A/50

XII. NATURE OF BUSINESS (provide a brief description)

Manufacture of industrial organic chemicals, specifically cyclic coal tar crudes and intermediates. Principal products are coal tar pitch, refined coal tars, naphthalene, anthracene, and creosote oils. F9A/51

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
A. H. Baker Vice President-Process Chemicals	A. H. Baker	Nov. 11, 1980

COMMENTS FOR OFFICIAL USE ONLY

Please print or type in the unshaded areas only
(fill—in areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-S80004 99

FORM 3 RCRA

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

S												T/A	C
F	O	H	D	0	4	3	7	3	0	2	1	7	3	1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)*

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

C	YR.	MO.	DAY
8	5 0	0 1	0 1

[ ] 2. NEW FACILITY *(Complete item below.)*

FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS

[ ] 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES — CODES AND DESIGN CAPACITIES

A. PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

1. AMOUNT — Enter the amount.
2. UNIT OF MEASURE — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

S		T/A	C
C	DUP	3	1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
X-1	S 0 2	600	G	
X-2	T 0 3	20	E	
1	S 0 1	60 000 000 30 IE	G Y	
2	S 0 2	12,200 000	G	
3	T 0 1	*See pg. 2 14,800 000	U	
4	S 0 2	*See pg. 2 187,000 000	G	
5				
6				
7				
8				
9				
10				

Continued from the front.

III. PROCESSES *(continued)*

C. SPACE FOR ADDITIONAL PROCESS CODES OR DESCRIBING OTHER PROCESSES *(code "T04")*. FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

*Proposed "process wastewater from creosote production." Proposed supplemental listing of hazardous wastes 40 CFR Part 261 (8) includes T01 of 14,800 gal./day.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER – Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number*(s)* from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY – For each **listed waste** entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each **characteristic** or **toxic contaminant** entered in column A estimate the total annual quantity of all the non–listed waste*(s)* that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:
   For listed hazardous waste: For each **listed** hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.
   For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process codes contained in Item III to indicate **all** the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.
   Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.
2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

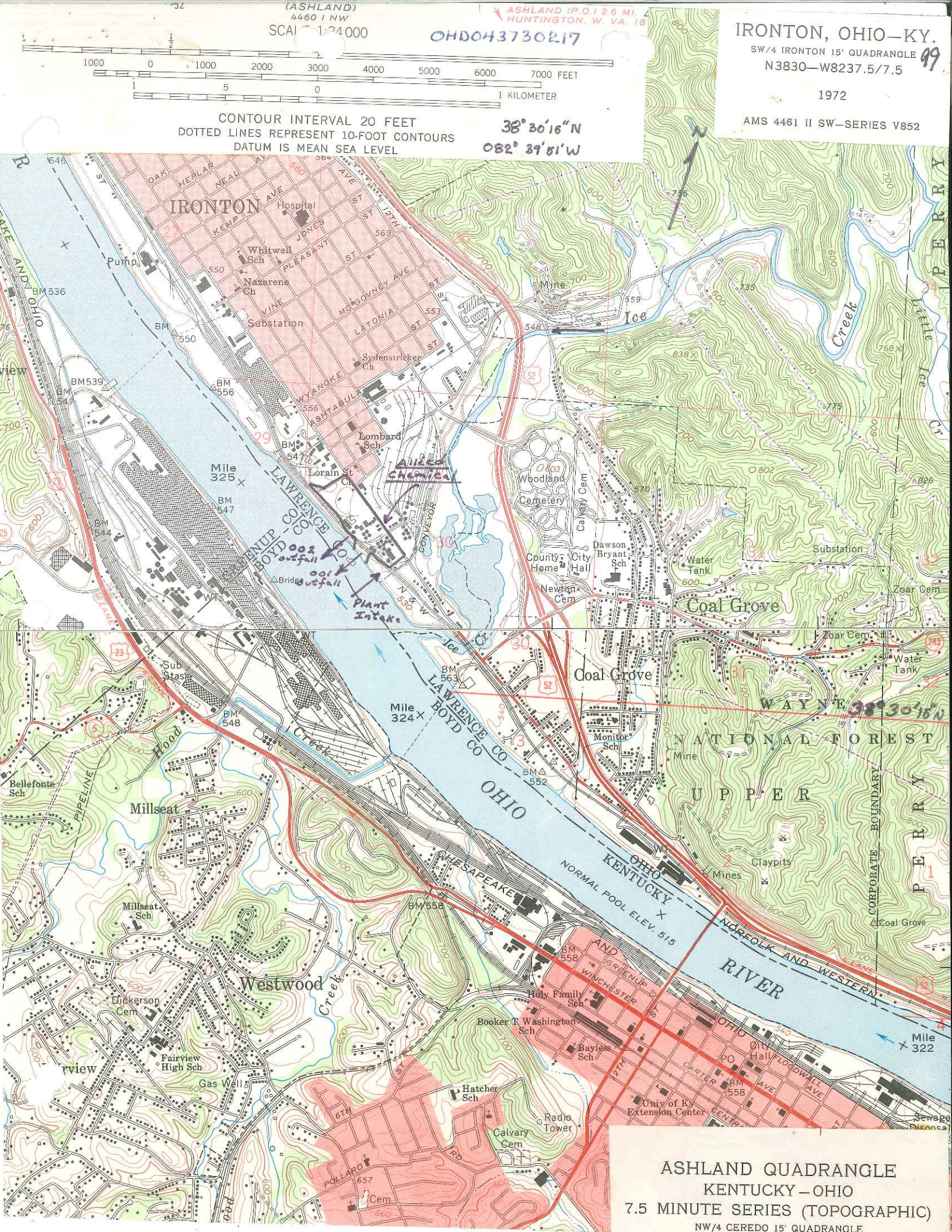
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

VI. Photographs

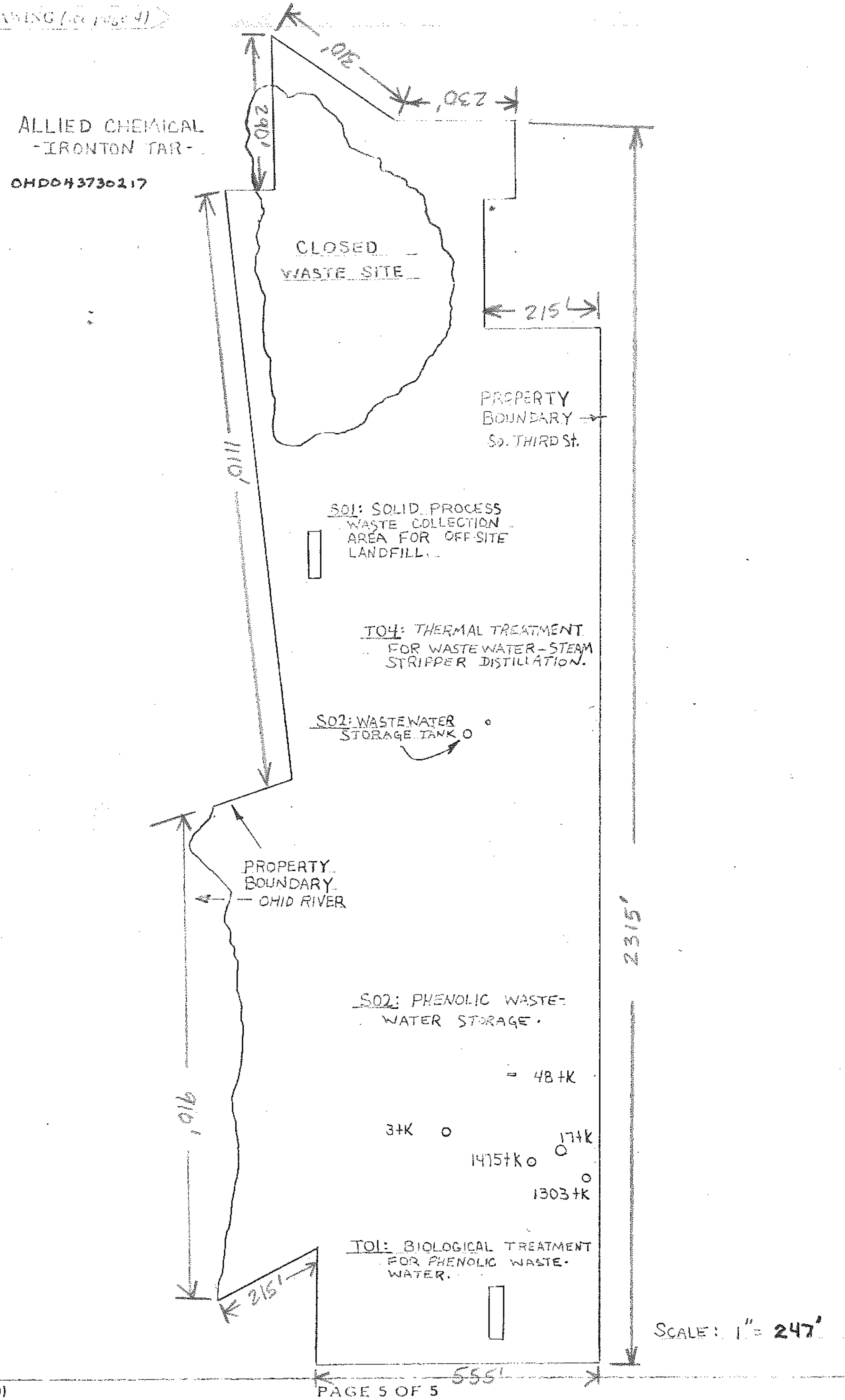
EPA ID. No. OHD043730217

S01: Solid Process Waste collection area for off-site landfill.

S02: Wastewater storage for off-site treatment and deep well injection.
12,200 gal.



ASHLAND QUADRANGLE
KENTUCKY—OHIO
7.5 MINUTE SERIES (TOPOGRAPHIC)
NW/4 CEREDO 15' QUADRANGLE


ALLIED CHEMICAL
-IRONTON TAR-
OHD043730217
310'
230'
280'
CLOSED
WASTE SITE
215'
PROPERTY
BOUNDARY
So. THIRD St.
1110'
S01: SOLID PROCESS WASTE COLLECTION AREA FOR OFF-SITE LANDFILL.
T04: THERMAL TREATMENT FOR WASTEWATER-STEAM STRIPPER DISTILLATION.
S02: WASTEWATER STORAGE TANK
PROPERTY
BOUNDARY
OHIO RIVER
2315'
S02: PHENOLIC WASTE-WATER STORAGE.
48 tK
3tK
17tK
1475tK
1303tK
910'
T01: BIOLOGICAL TREATMENT FOR PHENOLIC WASTE-WATER.
215'
555'
SCALE: 1" = 247'

Continued from page 2.
NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1): S W | O H D 0 4 3 7 3 0 2 1 7 | T/A 3 | C 1

FOR OFFICIAL USE ONLY: S W | DUP | T/A 3 | C 2 | DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1 ✓	U 0 5 1	INCLUDED WITH K035			Includes significant amounts of
2 ✓	U 1 6 5	~~1,300 000~~ INCLUDED WITH K035	~~T~~	~~S 0 1~~	non-hazardous solids and slag
3 ✓	K 0 3 5	1,300	T	S01 P.G. 4/11/82	for stabilization
4 ✓	F 0 0 3	1,330 000	T	S 0 2	Off-site disposal
5	U 0 5 7				(Also a candidate for S01)
6	*	~~Proposed Waste 18,750 000~~	T	S 0 2 T 0 1	*See page 2 comments 15
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
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21					
22					
23					
24					
25					
26					

EPA Form 3510-3 (6-80)

CONTINUE ON REVERSE

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAG

IV. 4.and5.

Wastewater shipped off-site for treatment and deepwell injection. Modifications of existing steam stripper in progress for on-site thermal treatment to recycle solvent to process.

EPA I.D. NO. (enter from page 1)

S												T/A	C
F	O	H	D	Ø	4	3	7	3	Ø	2	1	7	3	6

F6A:/55

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).*

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground–level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).*

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)			LONGITUDE (degrees, minutes, & seconds)		
38	3Ø	15Ø	Ø82	39	51Ø

F6:A/50

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F	G		

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
A. H. Baker, V.P.		Nov.11, 1980

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED

CONTINUE ON PAGE 5

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

IV. 4.and5.

Wastewater shipped off-site for treatment and deepwell injection. Modifications of existing steam stripper in progress for on-site thermal treatment to recycle solvent to process.

EPA I.D. NO. (enter from page 1)

S F | O H D 0 4 3 7 3 0 2 1 7 | T/A 3 | C 6

F6A:/55

~~F6A/55~~

V. FACILITY DRAWING

All **existing** facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).*

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground–level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).*

~~F6A/56~~ → F6:A/56

FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
38 30 15 N	082 39 51 W

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
E	

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
F	G		

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
A. H. Baker, V.P.	A. H. Baker	Nov.11, 1980

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED

Continued from page 2.
NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

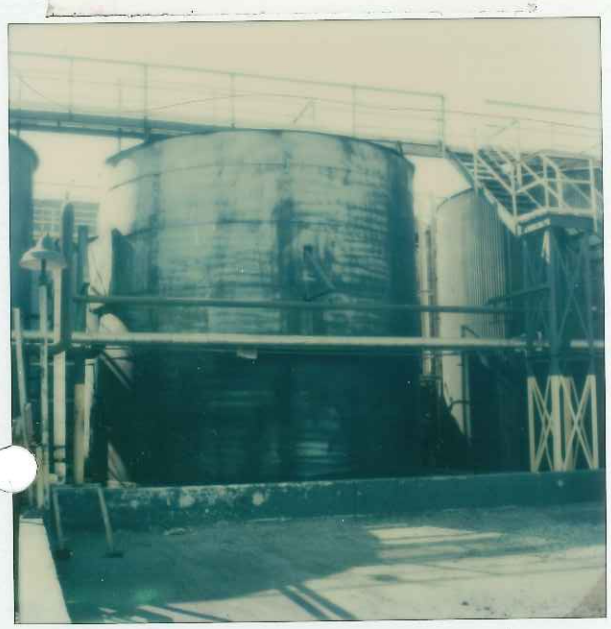
EPA I.D. NUMBER (enter from page 1): S W | O H D 0 4 3 7 3 0 2 1 7 | T/A 3 | C 1

FOR OFFICIAL USE ONLY: S W | DUP | T/A 3 | C 2 | DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	U051				Includes significant amounts of
2	U165	1,300 000	T	S01	non-hazardous solids and slag
3	K035				for stabilization
4	F003	1,330 000	T	S02	Off-site disposal
5	U057				(Also a candidate for S01)
6	*	Proposed Waste 18,750 000	T	S02T01	*See page 2 comments 15
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

Photographs
EPA ID No. OHD043730217
* "proposed" wastewater from creosote production
Phenolic wastewater Storage and
treatment facility.



* SO2: Wastewater Tar & Oil
Separation tank No. 17.
Capacity: 48,400 Gallons.

* SO2: Wastewater Tar & Oil
Separation tank No. 1475.
Capacity: 23,400 Gallons.

Photographs
EPA ID NO. OHD043730217

Phenolic Wastewater Storage and
future treatment facility.

*SO2: Wastewater Oil Separation Tank
1303 for Creosote Dehydration.
Capacity: 13,100 Gallons

TO1: Wastewater facility for
Biological treatment.
Aeration Tank Capacity: 93,000 Gallons

Closure in 1984

Photographs
EPA ID No. OHD043730217

Phenolic wastewater Storage and
future treatment facility.

*SO2: Wastewater Receiver No. 48; Storage for Tar Dehydration and Steam Jet Condensate. Wastewater tranfered to 17 and 1475 tanks. Capacity: 7800 Gallons.

*SO2: Tar & Oil Recovery Tank No. 3; Function of tank as follows:
(1) Recovery of Tar & Oils from Wastewater tank 17, 1475, 1303, and spillage within dikes.
(2) Wastewater collection from Naphthalene Distillation, Spillage, and dike area drainage.
Capacity: 102,100 Gallons.

(This information is required under Section 3005 of RCRA.)

Form Approved OMB No. [illegible]

FORM 3510-3 RCRA

EPA HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

I. EPA I.D. NUMBER: F O H D 0 4 3 7 3 0 2 1 7

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS
23	24 - 29	

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

[X] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)* (71)

[ ] 2. NEW FACILITY *(Complete item below.)* (71)

C 8 (15)

FOR EXISTING FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

YR.	MO.	DAY
5 0 (73 74)	0 0 (75 76)	0 0 (77 78)

FOR NEW FACILITIES, PROVIDE THE DATE *(yr., mo., & day)* OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY
(73 74)	(75 76)	(77 78)

B. REVISED APPLICATION *(place an "X" below and complete Item I above)*

[ ] 1. FACILITY HAS INTERIM STATUS (72)

[ ] 2. FACILITY HAS A RCRA PERMIT (72)

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C).*

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. AMOUNT – Enter the amount.
2. UNIT OF MEASURE – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below):* A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

S C | DUP | T/A C I (1 2 - 13 14 15)

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
	(16 - 18)	(19 - 27)	(28)	(29 - 32)		(16 - 18)	(19 - 27)	(28)	(29 - 32)
X-1	S 0 2	600	G		5				
X-2	T 0 3	20	E		6				
1	S 0 1	6,000	G		7				
	S 0 2	150,000	G		8				
3	T 0 1	20,000	U		9				
4					10				

C. PROCESSES (continued)

USE THIS SPACE FOR ADDITIONAL PROCESS CODES OR DESCRIPTIONS. INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER – Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number*(s)* from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY – For each **listed waste** entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each **characteristic** or **toxic contaminant** entered in column A estimate the total annual quantity of all the non–listed waste*(s)* that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each **listed** hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process codes contained in Item III to indicate **all** the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

Continued from page 2

NOTE: Photocopy this page if you need more space. Fill out one set of forms for each additional waste. Approved OMB No. 158-S[illegible]

| | | |

Continued from the front

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON FRONT

EPA I.D. NO. *(enter from page 1)*

F	0	H	D	0	4	3	7	3	0	2	1	7		6
1	2											13	14	15

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail).*

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground–level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail).*

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE *(degrees, minutes, & seconds)*	LONGITUDE *(degrees, minutes, & seconds)*
38 30 15 N (65 66 / 67 68 / 69 - 71)	082 39 51 W (72 - 74 / 75 76 / 77 - 79)

VIII. FACILITY OWNER

[X] A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. *(area code & no.)*
C E (15 16 - 55)	(56 - 58) - (59 - 61) - (62 - 65)

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
C F (15 16 - 45)	C G (15 16 - 40)	(41 42)	(47 - 51)

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

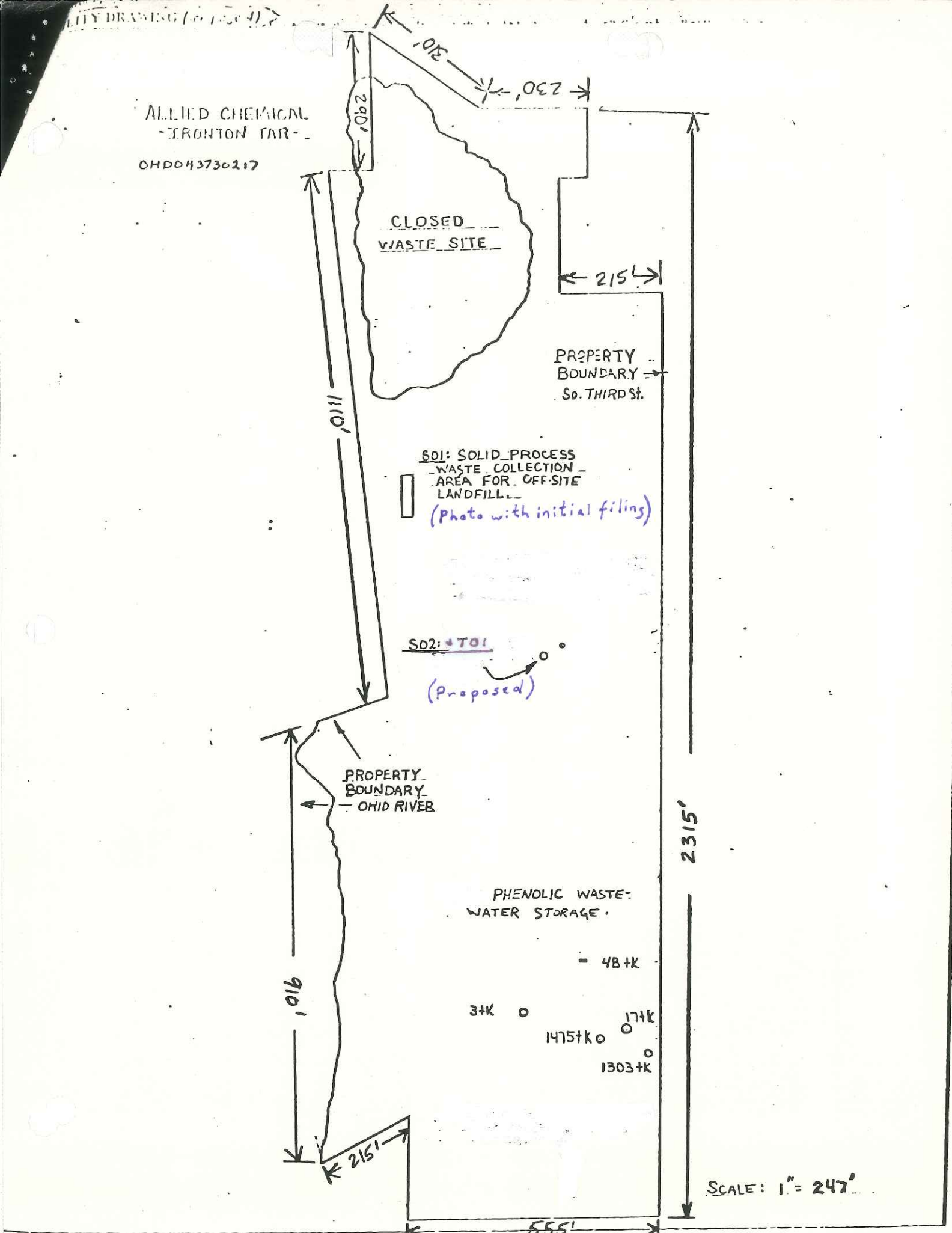
A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
C. L. Davidson	C. L. Davidson	7/2/85

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED

CONTINUE ON PAGE 5


ALLIED CHEMICAL
-IRONTON FAR-
OHD043730217
310'
230'
200'
CLOSED
WASTE SITE
215'
PROPERTY
BOUNDARY
So. THIRD St.
1110'
S01: SOLID PROCESS
WASTE COLLECTION
AREA FOR OFF-SITE
LANDFILL
(Photo with initial filing)
S02: TOI
(Proposed)
PROPERTY
BOUNDARY
OHID RIVER
2315'
PHENOLIC WASTE
WATER STORAGE
4B+K
3+K
17+K
1475+K
1303+K
1016'
215'
555'
SCALE: 1" = 247'

A.4 Closure/ Post-Closure

OhioEPA
State of Ohio Environmental Protection Agency
P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149
(614) 644-3020 **Fax** (614) 644-2329

Richard F. Celeste
Governor

October 25, 1990

Re: Allied Signal, Inc.
US EPA ID No.: OHD043730217
Ohio Permit No.: 04-44-0059
Completion of Closure Process

Allied Signal, Inc.
Attn: Mr. R. L. Haley
3330 S. Third Street
Ironton, Ohio 45638

Dear Mr. Haley:

According to our records, all necessary activities have been completed at your facility regarding closure of a hazardous waste storage tank.

Therefore, this letter is to inform you that, based on the information you had submitted and an investigation by Agency staff, you have gone through formal closure and will maintain the status of a large quantity generator.

You should continue to use the identification number assigned to you by the US EPA for purposes of compliance with the Ohio EPA manifest, recordkeeping and reporting requirements for generators and transporters of hazardous waste as appropriate.

Should you have any questions concerning your current status, please contact the Ohio EPA, Southeast District Office, Attn: Mike Moschell, 2195 Front Street, Logan, Ohio 43138, telephone: (614) 385-8501.

If you intend to no longer pursue your Ohio Hazardous Waste Installation and Operation Permit and wish to withdraw your permit, the following information should be forwarded to Ohio EPA within thirty (30) days:

1. A formal request for withdrawal signed by an authorized representative according to Rule 3745-50-42(A)-(D) of the Ohio Administrative Code (Attachment 1) including a full explanation of your reasons for withdrawal of your application; and,

2. A certification statement signed by the same authorized representative of your facility (Attachment 2).

Upon receipt of the above items, Ohio EPA will review your submission along with any facility inspection report(s). If no additional information is necessary, your permit withdrawal request will be finalized.

Please forward the above information to: Ohio EPA, Division of Solid and Hazardous Waste Management, Attn: Thomas E. Crepeau, Data Management Section, 1800 WaterMark Drive, Columbus, Ohio 43266-0149.

Please note that you must notify U.S. EPA of your change in status, if you have not already done so.

Should you have further questions concerning this procedure, please call Randy Sheldon, Data Management Section at (614) 644-2977.

Very truly yours,

Thomas E. Crepeau

Thomas E. Crepeau, Manager
Data Management Section
Division of Solid and Hazardous Waste Management

TC/RS/ds

cc: Lisa Pierard, US EPA, Region V
Hazardous Waste Facility Board
Randy Meyer, RCRA TAS, DSHWM
Lori Stevenson, RCRA Enf. Section, DSHWM
Mike Moschell, SEDO, DSHWM
File

2006R/76-77

OhioEPA
State of Ohio Environmental Protection Agency
P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149

Richard F. Celeste
Governor

October 25, 1989

Mr. R.L. Haley
Allied-Signal, Inc.
Ironton Tar Processing Plant
3330 South Third Street
Ironton, Ohio 45638

Re: In the Matter of Allied-Signal, Inc.
Case No. 89-HW-015

OHD 043730217
TSD-PA

Dear Mr. Haley:

A letter from counsel for Allied-Signal, Inc., Stephen Q. Giblin, Esq., dated June 29, 1989, was forwarded to Ohio EPA by the Ohio Attorney General's Office. The letter, to which was attached a Certification signed by G. Howard Collingwood of Allied-Signal, Inc., discussed the settlement of the above-referenced Adjudication Request. As a result, Ohio EPA has determined that the container storage unit at the facility (04-44-0059/OHD 043 730 217) is not subject to closure requirements due to the fact that the unit was used only for the less than 90 day storage of hazardous waste. This was indicated by the manifests and certification sent to Ohio EPA and the Ohio Attorney General's Office. Therefore, Ohio EPA hereby withdraws the Director's January 24, 1989 proposed disapproval of the closure plan for said storage unit. The container storage area is no longer subject to closure requirements and will not be as long as all hazardous waste generator requirements are strictly observed by the company. Should the company fail to meet these requirements, closure of the unit will be required.

Allied-Signal should now submit a written request to the Director, following the appropriate rules (See OAC 3745-50-47), in order to have its hazardous waste facility installation and operation permit withdrawn. Furthermore, as noted in your letter, Ohio EPA now expects Allied-Signal, Inc. (04-44-0059/OHD 043 730 217) to fulfill its obligation and withdraw the above-referenced Adjudication Request. If you have any questions, pleae feel free to call Ed Kitchen or Paul Vandermeer, Division of Solid and Hazardous Waste Management, at (614) 644-2956 or Shane Farolino, Ohio Attorney General's Office, at (614) 466-2766.

Sincerely,

R. L. Shank

Richard L. Shank, Ph.D.
Director

RLS/PV/pas

cc: Edward Kitchen, DSHWM, Ohio EPA
Edwin Lim, DSHWM, Ohio EPA
Ken Dewey, Ohio EPA, SEDO
Paul Vandermeer, DSHWM, Ohio EPA
Mike Moschell, Ohio EPA, SEDO
Shane Farolino, Ohio AGO
Lisa Pierard, USEPA - Region V

1794U

Allied Signal

Allied-Signal Inc.
Engineered Materials Sector
Ironton Tar Processing Plant
3330 South Third Street
Ironton, OH 45638
Telephone (614) 533-1040

February 14, 1989

Ohio EPA
Division of Solid and
Hazardous Waste Management
P. O. Box 1049
Columbus, OH 43266-0149

ATTN: Thomas Crepeau, Manager
Data Management Section

RE: Closure Plan
Allied-Signal, Inc.
OHDO 43730217/04-44-0059
R. L. Shanks, Ph.D/R. L. Haley, 1-24-89

Dear Mr. Crepeau:

Please find attached closure plan submitted for the Ironton Tar Plant which was revised according to the above referenced letter.

As indicated in our previous closure plan we will continue to manage our hazardous waste for less than 90 day storage after closure is completed.

Sincerely,

R. L. Haley
Plant Manager

RLH/skg
Attachment

cc: USEPA
Region V, 5HS-13
230 South Dearborn Street
Chicago, IL 60604
ATTN: Lisa Pierard, Chief Waste Mgn Division
Technical Programs Section

Ohio EPA
Southeast District Office
2195 Front Street
Logan, OH 43138
ATTN: Mike Moschell

COMPLETENESS/TECHNICAL REVIEW OF INTERIM STATUS CLOSURE PLAN

ALLIED-SIGNAL, INC.
IRONTON TAR PLANT
IRONTON, OHIO

EPA I.D. No. OHD043730217

Prepared for:

U.S. EPA Region V
230 South Dearborn Street
Chicago, Illinois 60604

Prepared by:

Kearney/Centaur Division
A.T. Kearney, Inc.
225 Reinekers Lane
Alexandria, Virginia 22314

Contract No. 68-01-7374
Work Assignment No. R25-03-22

February 1989

COMPLETENESS/TECHNICAL REVIEW
INTERIM STATUS CLOSURE PLAN
[40 CFR PART 265]

Allied-Signal, Inc.
Ironton Tar Plant
Ironton, Ohio

EPA I.D. No. OHD043730217

GENERAL COMMENTS

A completeness/technical review of the hazardous waste storage facility closure plan submitted by Allied-Signal, Inc. has been conducted. The source of information for this review was:

- Closure Plan for Allied-Signal, Inc., Ironton Tar Plant, May 1981, Revised September 30, 1988.

Allied-Signal has not adequately described the function and regulatory status of the Process Recycle Storage Area portion of the storage facility. The waste types stored in this area were not presented. Additionally, it appears that a complete listing of hazardous wastes managed at the container unit has not been provided. This information is necessary to determine if the facility is successfully decontaminated and properly closed, and that all wastes are disposed using appropriate methods. Allied-Signal has been instructed to provide a complete waste inventory and to specify how any restricted wastes will be managed.

Allied-Signal must also provide more information regarding management of hazardous wastes during closure activities until the hazardous waste storage facility is certified closed in accordance with 40 CFR Part 265 Subpart G regulations. This is especially needed if the closure plan revisions will require closure activities to extend longer than originally estimated.

The closure plan for the hazardous waste storage facility is substantially deficient in several areas. These deficiencies are discussed in detail in the attached specific comments.

COMPLETENESS/TECHNICAL REVIEW
INTERIM STATUS CLOSURE PLAN
[40 CFR PART 265]

Allied-Signal, Inc.
Ironton Tar Plant
Ironton, Ohio

EPA I.D. No. OHD043730217

SPECIFIC COMMENTS

I. GENERAL CLOSURE REQUIREMENTS

I.A. Closure Performance Standard: [40 CFR 265.111]

The closure plan does not demonstrate how the closure activities will control, minimize or eliminate post-closure escape of hazardous waste, hazardous constituents, contaminated run-off, or waste decomposition products to the ground, surface waters or atmosphere for the following reasons:

- o The closure plan does not specify adequate criteria for judging the extent of decontamination necessary. Allied-Signal must identify all hazardous constituents stored in the hazardous waste storage area and Process Recycle Storage Area. The Ohio EPA rinseate clean standards for RCRA closures (Ohio EPA interoffice memo dated October 6, 1988) must be specified as the criteria for determining the extent of equipment and concrete decontamination necessary. Ohio "clean" levels for soil (Ohio EPA closure plan review guidance, February 8, 1988) must be specified as the criteria for determining the extent of soil decontamination necessary. See deficiency comment II.B-6 for further information.

- o The closure plan does not provide an adequate description of decontamination steps and procedures for cleaning equipment and structures or removing contaminated soils. This includes decontamination of equipment used to perform closure activities as well as cleaning or disposal of personnel protective equipment. A personnel health and safety plan must also be included. Refer to deficiency comments II.B-7 and II.B-8.

- The closure plan does not include an adequate description regarding disposal of the hazardous waste residues. Detailed information regarding the management of decontamination rinseate and removed residues in accordance with 40 CFR 262 must be provided. Additional information is given in deficiency comment II.B-9.

- The closure plan does not include an adequate description of the methods for sampling and testing to demonstrate the success of the decontamination. A more detailed sampling and testing plan must be developed to demonstrate that all equipment, structures and soils have been successfully decontaminated. Refer to deficiency comment II.B-10.

I.B. Content of Closure Plan

I.B-1. Description of Partial and/or Final Closure of the Facility [40 CFR 265.112(b)(1)]

The closure plan must specify whether closure of the container storage unit is a partial or final facility closure. The closure plan states that the sludge accumulated in storage tanks is a process waste. Clarify whether the storage tanks are RCRA hazardous waste management units. All hazardous waste management units that were included in the Part A application must also be identified in the closure plan. If this is a partial facility closure, state in the closure plan the names of the other units remaining in operation. If no other units exist, state in the closure plan that this storage facility is the only RCRA-regulated unit under EPA I.D. No. OHD043730217, and that closure of this unit represents a final closure at the facility.

Also provide a topographic or county map showing the location of the facility. Include a detailed map of the facility with each hazardous waste management unit clearly identified. Specify the map scales and provide north arrows.

I.B-2. Identification of Maximum Extent of Operations [40 CFR 265.112(b)(2)]

State in the closure plan how long the hazardous waste storage area has been in operation. Also indicate any other hazardous waste management units that would be regulated under RCRA jurisdiction. Include a drawing showing the relationship of the storage facility to other points or structures on the property as discussed in item I.B-1.

I.B-3. Estimate of Maximum Inventory of Hazardous Waste [40 CFR 265.112(b)(3)]

The closure plan clearly indicates that the portable roll-off container has a 30-yard capacity. The closure plan does not indicate the waste types managed in the Process Recycle Storage Area. Identify the waste types. The closure plan must describe the maximum inventory of wastes in storage at any one time during the life of the facility. This includes waste quantities and waste types in the portable roll-off container, Process Recycle Storage Area and sump. Page 2 of the closure plan indicates that hazardous wastes or constituents other than creosote, creosote sludge and naphthalene may be managed at this facility. In addition, listed waste K035 is defined in 40 CFR 261.32 as "wastewater treatment sludges generated in the production of creosote," not sludges from storage tank bottoms as indicated on page 2 of the closure plan. Revise the closure plan to clearly indicate all types of wastes managed at this unit and their maximum volumes in inventory at any given time. Calculations showing the derivation of the maximum inventory must be provided for all waste types and methods of storage of the inventory.

I.B-4. Detailed Description of Removal of Hazardous Waste Inventory [40 CFR 265.112(b)(3) and 265.114]

The closure plan identifies at least the following listed RCRA wastes that are stored at the storage facility: K035, U051, and U165. K035 and U051 are "soft hammer" wastes under the First Third restrictions final rule (refer to 53 FR 31138, August 17, 1988), and U165 is a "soft hammer" waste under the Second Third restrictions proposed rule (refer to 54 FR 1056, January 11, 1989) which is expected to become final rule effective June 8, 1989. For "soft hammer" wastes, the owner/operator must treat the wastes prior to land disposal, or demonstrate and certify that there is no practically available treatment that reduces toxicity or mobility of the waste and that disposal of these wastes in a landfill or surface impoundment unit that meets the minimum technological requirements of RCRA section 3004(o) is the only practical alternative. Page 1 of the closure plan states that creosote wastes (K035 and U051) will be segregated from the 30 cubic yard storage container and shipped off-site for incineration. Page 3 of the closure plan states that all waste materials will be shipped off-site to a landfill. Clarify how the restricted wastes will be managed. If Allied-Signal intends to land dispose the restricted wastes, they

must demonstrate to the Regional Administrator that incineration capacity is not available. Also refer to deficiency comment II.B-4 regarding transportation and other items.

I.B-5. Identification of and Type of Off-Site Hazardous Waste Management Unit(s) [40 CFR 265.112(b)(3)]

The closure plan indicates that creosote wastes (KO35 and U051) will be shipped off-site for incineration and also that all remaining wastes will be shipped to an off-site landfill, apparently operated by Wayne Disposal. See deficiency comment I.B-4 for clarification on management of the hazardous waste inventory. Provide the name of the actual hazardous waste treatment or disposal facility and the EPA I.D. No. Also indicate whether this facility has interim status or has been permitted. Include a description of the treatment or disposal methods used at that facility (for example, disposal in closed containers).

I.B-6. Decontamination and Removal of Hazardous Waste Residues [40 CFR 265.112(b)(4) and 265.114]

The closure plan must identify all areas and equipment requiring decontamination and provide a detailed description of all decontamination procedures. Revise the closure plan to include:

- o A list of potentially contaminated equipment such as trucks, containers, forklifts etc. Indicate where and how the equipment will be decontaminated.

- o Detailed procedures for cleaning, removing or disposing of contaminated equipment, structures and soil.

- o Detailed methods for sampling, testing and disposing of contaminated scraped residues and soils. Include references to U.S. EPA document SW-846 and other standardized procedures as appropriate.

Provide documentation showing that it is permissible to discharge waste water from the Process Recycle Storage Area sump to the on-site wastewater treatment plant. Include information such as a chemical analysis of the sump water, the capabilities of the treatment plant to process this waste, the effects that this waste water will have on the treatment process and resulting effluent, and the pollutant discharge levels allowed under the plant's existing NPDES permit.

Refer to deficiency comments II.B-7 through II.B-10 for additional details.

I.B-7. Detailed Description of Other Activities Necessary for Closure [40 CFR 265.112(b)(5)]

The closure plan indicates that this unit will be taken out of service for a very short time in order to perform closure. Long delays during closure could affect plant operations and the use of this area for storage of hazardous wastes for less than 90 days. Provide a detailed description of how and where the hazardous wastes will be managed during the closure period until this storage unit is certified closed (i.e., can become a less than 90-day accumulation facility). Indicate the actual length of time that this unit can be out of service without affecting plant operations. Also provide contingency plans for hazardous waste management in the event that delays occur during closure activities resulting from bad weather, discovery of soil contamination or other factors.

I.B-8. Schedule for Closure of Each Unit and Final Facility Closure [40 CFR 265.112(b)(6-7)]

The closure schedule should be based on the number of calendar days required to perform each milestone activity of the closure process. This schedule should begin with the day on which the final volume of hazardous waste is received or the day on which the closure plan is approved by the Regional Administrator or Ohio EPA, whichever is later. Calendar dates are not required since the date of plan approval is not known in advance.

The closure schedule presented in the closure plan is substantially deficient in closure activity detail. In order to allow tracking of the progress of closure, the closure schedule should include a milestone chart that clearly defines when each closure activity will begin and the total length of time required to complete each activity. These activities include removal of final waste volume, decontamination of equipment and structures, sampling of soils, rinseate, etc., removal of contaminated structures, submittal of certification by an independent registered professional engineer and other activities as appropriate. Revise the closure plan accordingly to include this information. Also state that Allied-Signal will notify the EPA Regional Administrator or Ohio EPA in advance of any critical activities such as sampling, decontamination, etc. so that agency representatives can be present to observe these activities.

The Schedule of Final Closure on page 2 of the closure plan indicates that closure will begin on April 12, 1989 and will be completed on April 14, 1989. However, line F of that schedule indicates that the time to close the facility is 10 days. These dates also do not match those given in the General Closure Compliance Schedule on page 2 of the closure plan. Resolve these discrepancies.

I.B-9. Amendment of Closure Plan [40 CFR 265.112(c)]

Amend the closure plan to address the deficiencies presented in this review. Also add a statement that Allied-Signal will submit an amended closure plan to the Regional Administrator if an unexpected event occurs during closure which requires modification to the closure plan. This amendment must be submitted within 30 days after the unexpected event occurs.

I.B-11. Schedule for Beginning Closure [40 CFR 265.112(d)(2)]

The closure schedule must show that closure will begin within 30 days after the final volume of hazardous waste is received at the storage unit. Revise the closure schedule to show this event. Calendar dates are not required or recommended in the closure schedule.

I.B-12. Waste Treated, Removed or Disposed of Within 90 Days and Extensions of Time Periods [40 CFR 265.113(a)]

The closure schedule must state that all hazardous wastes and residues (hazardous waste inventory, rinseate, contaminated soils, etc.) will be removed from the site within 90 days after approval of the closure plan or receipt of the final volume of hazardous wastes. Calendar dates are not required or recommended.

I.B-13. Closure Completed Within 180 Days and Extensions of Time Periods [40 CFR 265.113(b)]

Revise the closure schedule to show that all closure activities, including certification of closure by an independent registered professional engineer, will be completed within 180 days after approval of the closure plan or receipt of final volume of hazardous wastes, whichever occurs later. Again, calendar dates are not required or recommended.

I.B-14. Timeframes for Demonstrations for Extensions [40 CFR 265.113(c)]

Add a statement to the closure plan indicating that if

closure cannot be completed within 180 days, Allied-Signal will submit a request for extension of the closure period to the Regional Administrator at least 30 days prior to the expiration of the 180-day period.

I.C. Certification of Closure and Survey Plat

I.C-1. Certification of Closure [40 CFR 265.115]

The closure plan states that "a registered professional engineer will certify the closure according to the plan." Revise the closure plan to state that the closure will be certified by an independent registered professional engineer. This certification will be signed by the owner or operator as well as that professional engineer. The certification will be submitted to the Regional Administrator, by registered mail, within 60 days of the completion of closure. The certification will state that the unit or facility has been closed in accordance with the specifications in the approved closure plan. Documentation supporting the independent registered professional engineer's certification will be furnished to the Regional Administrator upon request until he releases the owner or operator from the financial assurance requirements for closure under 40 CFR 265.143(h). The owner or operator and independent registered professional engineer will use the language and signature requirements found in Ohio Regulations OAC 3745-50-42 and OAC 3745-50-42(D).

Ohio EPA policy also requires that Ohio EPA inspect all closed hazardous waste management units at the completion of closure or when certification is received from the owner/operator.

I.D. Closure Cost Estimate

I.D-1. Cost Estimate When Closure is Most Expensive [40 CFR 265.142(a)]

The closure plan should specifically state that all costs are based on closure occurring when the extent and manner of the facility operation will make closure the most expensive. Additionally, the closure cost estimate must be based on all closure activities performed by a third party. Revise the closure plan to include these statements.

The following revisions should be made under Phase I - Removing Inventory. Revise all items to be consistent

with the treatment and/or disposal requirements for the various waste types, including restricted wastes. Refer to deficiency comment I.B-4 for additional information regarding treatment and disposal requirements. Itemize packaging, transportation, treatment, disposal, and all other costs for each of the treatment and/or disposal options to be used for the various types of waste.

The following revisions should be made under Phase II-Decontamination of the Facility:

- o Cleansing Tank Facilities
  - The cost of cleaning should not include references to equipment rental and plant labor to decontaminate the facility.
  - Include costs for protective clothing for decontamination personnel.
  - Include costs for equipment decontamination.
  - Include transportation costs for disposal of residues from cleaning.
  - The cost of contract cleaning also appears low.

- o Removing Contaminated Soils
  - "Cost to determine if areas around tank facilities are contaminated with hazardous wastes" appears low. Base these costs on a third party performing the work.
  - Removal of 2 cubic yards of contaminated soil is not an adequate contingency.
  - Include costs to decontaminate any equipment used to remove contaminated soils.
  - Provide separate costs for excavation, transportation, and management.

- o Testing for Success of Decontamination
  - Add costs for analytical testing of equipment decontamination fluid.
  - Include analytical testing of concrete rinseate.
  - Include analytical testing of soils to demonstrate that all contaminated soils are removed.

Remove all references to "tanks" and change them to "containers" in the closure cost estimate, or provide information to explain the previously unmentioned tanks.

Support each line item estimate with calculations showing unit prices, labor hours, disposal fees, costs per analytical test, etc. Include fees and contingencies for a third party closing the facility.

I.D-2. Adjustments for Inflation [40 CFR 265.142(b)]

State in the closure plan that the closure cost estimate will be updated annually to reflect increases due to inflation. State that the inflation factor published by the U.S. Department of Commerce in its "Survey of Current Business" will be used. Also indicate that cost adjustments will be made within 30 days after the close of the firm's fiscal year if the owner/operator is using the financial test or corporate guarantee. State that the adjustment will be made within 60 days prior to the anniversary date of the establishment of financial instruments if the owner/operator is using other financial instruments.

I.D-3. Revisions to Closure Cost Estimate [40 CFR 265.142(c)]

Revise the closure cost estimate as specified in this deficiency review and submit with the revised closure plan.

I-E. Financial Assurance for Closure [40 CFR 265.143]

Provide a copy of the established financial assurance mechanism for closure of this facility. The value of this mechanism must be sufficient to cover the cost of closure of all hazardous waste management units at this facility in accordance with the revised closure plan. The mechanism must be one of the following options:

- o Closure Trust Fund [40 CFR 265.143(a)];
- o Surety Bond Guaranteeing Payment to Closure Trust Fund [40 CFR 265.143(b)];
- o Closure Letter of Credit [40 CFR 265.143(c)];
- o Closure Insurance [40 CFR 265.143(d)];
- o Financial Test and Corporate Guarantee [40 CFR 265.143(e)];
- o Use of Multiple Financial Mechanisms [40 CFR 265.143(f)]; or
- o Use of Financial Mechanism for Multiple Facilities [40 CFR 265.143(g)].

I.F. Liability Coverage

I.F-1. Sudden Accidental Occurrences [40 CFR 265.147(a)]

The owner/operator is required to maintain liability coverage for sudden accidental occurrences for all hazardous waste management facilities. This coverage must extend until the Regional Administrator receives certification that closure has been completed in accordance with the approved closure plan and the Regional Administrator notifies the owner/operator in writing that they are no longer required to maintain the liability coverage. This coverage must be maintained in the amount of at least $1 million per occurrence with an annual aggregate of at least $2 million, exclusive of legal defense costs. Allied-Signal must provide documentation of compliance with these liability requirements in one of the following ways:

- o Liability Insurance [40 CFR 265.147(a)(1)];
- o Financial Test or Corporate Guarantee [40 CFR 265.147(a)(2)];
- o Letter of Credit [40 CFR 265.147(a)(3)];
- o Surety Bond [40 CFR 265.147(a)(4)];
- o Trust Fund [40 CFR 265.147(a)(5)]; or
- o Combination of Liability Insurance, Financial Test, Corporate Guarantee, Letter of Credit, Surety Bond and Trust Fund [40 CFR 265.147(a)(6)].

II. CLOSURE OF CONTAINER STORAGE AREA

II.B. Content of Closure Plan

II.B-1. Detailed Description of How the Container Storage Area Will be Closed [40 CFR 265.112(b)(1)]

The closure plan does not provide an adequate description of how the hazardous waste storage area will be closed. Revise the closure plan to provide additional details regarding the closure as contained in this review. The level of detail must be sufficient to determine that the closure procedures are reasonable, the closure schedule can be justified, closure cost estimates can be substantiated, and adequate financial assurance is provided. The major items are summarized below with greater detail provided in the remaining deficiency comments:

- o An estimate of the maximum volume of hazardous waste inventory ever in storage must be presented. This includes any RCRA-regulated wastes that are managed in the Process Recycle Storage Area. Additionally, all hazardous wastes and hazardous constituents managed at these units must be identified by chemical name and EPA hazardous waste number.

- o A health and safety plan to be used during closure activities must be included.

- o A detailed description of the steps needed to remove or decontaminate all contaminated equipment, structures and soil must be provided.

- o The plan must include criteria for determining the extent of decontamination necessary, cleaning procedures and testing methods to demonstrate the success of decontamination.

II.B-4. Detailed Description of Removal of Hazardous Waste Inventory [40 CFR 265.112(b)(3) and 265.114]

The closure plan must include a detailed description of how the hazardous waste inventory will be managed during the closure period. Include details regarding removal, treatment, transportation and disposal of the wastes. Include a description of how plant generated wastes will be stored during closure activities. Include any drummed or other containerized waste associated with the Process Recycle Storage Area.

The closure plan must also include a personnel health and safety plan. This must provide a description of the protective clothing and equipment to be used by personnel during removal and decontamination. Cleaning methods or disposal of this protective equipment must also be addressed. Refer to the following for guidance on the components of a health and safety plan: OSHA regulations for hazardous waste operations (29 CFR 1910; 120 Federal Register, Vol. 51, No. 244, pp. 45654-45675) and Chapter 3 of the Occupational Safety and Health Guidance Manual for Hazardous Waste Site Activities (NIOSH, 1985).

Allied-Signal must determine what portion of the hazardous waste inventory consists of restricted wastes. The closure plan must include appropriate treatment or disposal methods for restricted as well as non-restricted wastes. Treatment/disposal facility names, EPA I.D. numbers and treatment/disposal methods

must be included in the plan. See deficiency comment I.B-4. for additional information.

Revise the closure plan to include details on how Allied-Signal will meet all DOT pre-transport regulations pertaining to packaging (49 CFR Parts 173, 178, and 179), labeling and marking (49 CFR Part 172), and placarding (49 CFR Part 172, Subpart F). In addition, state how Allied-Signal will comply with the RCRA manifest (40 CFR Part 262, Subpart B) and recordkeeping requirements (40 CFR Part 262, Subpart D) for each shipment of hazardous waste.

II.B-6. Criteria for Determining the Extent of Decontamination Necessary [40 CFR 265.112(b)(4) and 265.114]

The closure plan states that a new concrete pad (Process Recycle Storage Area) was constructed in 1982 adjacent to the hazardous waste container area. The closure plan does not indicate the waste types managed on this pad, the waste management practices currently utilized, and the management practices used before the pad was constructed. The closure plan must include a description of the management practices utilized both before and after construction of this pad. A list of all wastes currently and previously managed at these units must also be identified. Demonstrate that releases of hazardous waste constituents have not occurred beneath this newer slab, or submit a soil sampling and analysis plan for this area. Details of a sampling and analysis plan are discussed below.

The criteria for determining the extent of decontamination necessary should be based on all hazardous constituents stored in the Process Recycle Storage Area and hazardous waste storage area. The closure plan should include a waste sampling and analysis plan to identify all Appendix VIII hazardous constituents that were ever managed at these units. The sampling and analysis plan should test for all of these hazardous constituents and should be included in the revised closure plan. The revised plan should also indicate the number of samples to be tested from concrete, rinseate, soil, etc. and the rationale for the selection of these tests.

The closure plan must be revised to include a sampling plan to test for background levels of hazardous constituents in the soils at this site. That plan must also include a sampling plan for potentially contaminated soils. The plan should state that:

- o Allied-Signal will visually inspect all concrete slabs in the proposed closure area for cracks and gaps;

- o Soil samples will be taken from beneath any cracks and gaps in the slabs and analyzed for all hazardous constituents managed at these units; and

- o Soil samples will be collected and analyzed from potentially contaminated areas adjacent to the slabs and beneath the newer Process Recycle Storage Area slab. Sampling requirements beneath the Process Recycle Storage Area will be based on past waste management practices in this area.

Soil samplings and analysis for background levels and potentially contaminated areas should be conducted in accordance with the Ohio EPA closure plan review guidance document dated February 8, 1988. Revise the closure plan to include the following items in a soil sampling and analysis plan for background levels and contaminated areas:

- o Parameters to be analyzed;

- o Number of samples;

- o Locations of samples;

- o Depths of samples (both surface points and deeper samples);

- o Rationale for sample selection;

- o Sampling methods and equipment;

- o Analytical methods;

- o Quality assurance/quality control for the laboratory;

- o Chain of custody for samples; and

- o A statement of the "clean" level for soil.

Soil samples from potentially contaminated areas must be analyzed for all the hazardous constituents of concern identified in the waste analysis. Soil samples will be determined to be contaminated as follows:

- o For naturally occurring elements or compounds when the concentrations in the soil exceed the mean of the background samples plus two standard deviations,

or when the concentrations in the soil exceed the upper limit of the range for Ohio farm soils as specified in Ohio EPA closure plan guidance. (See Ohio EPA Closure Plan Review Guidance, February 8, 1988).

- For Appendix VIII constituents not naturally occurring in the soil, when the concentrations in the soil are above analytical detection limits using methods in U.S. EPA's SW-846 (Third Edition). State that where more than one analytical method is specified, Allied-Signal will use the method with the lowest detection limit.

All sampling and analytical procedures should be in accordance with U.S. EPA Publication SW-846 (Third Edition), "Test Methods for Evaluating Solid Waste, Physical/Chemical Methods." The specific test methods must be stated in the revised closure plan. The closure plan must also show that the laboratory analyzing the samples has a complete QA/QC program acceptable to the Ohio EPA.

For any hazardous constituents detected, the criteria for determining the extent of equipment and concrete surface decontamination required will be based on the Ohio EPA rinseate clean standards for RCRA closures. This was presented in an Ohio EPA interoffice memorandum dated October 6, 1988. Revise the closure plan and specify these standards which are as follows:

- The public drinking water maximum contaminant level (MCL) for hazardous waste constituents as promulgated in 40 CFR 141.11 and OAC 3745-81-11 for inorganics and 40 CFR 141.12 and OAC 3745-81-12 for organics.

- If an MCL is not available, then the maximum contaminant level goal (MCLG) as promulgated in 40 CFR 141.50 shall be used; or

- If neither an MCL or an MCLG is available, one mg/l will be used.

- If the MCL or MCLG is less than the contaminant's analytical detection limit using methods found in U.S. EPA Publication SW-846, the SW-846 analytical detection limit shall be used as the clean standard.

- For characteristic wastes, the rinseate must not be hazardous by characteristics specified in 40 CFR 261 and OAC 3745-51.

II.B-7. Detailed Description of Decontamination Steps [40 CFR 265.112(b)(4) and 265.114]

The closure plan does not provide enough detail regarding procedures for decontamination of the storage facility. Revise the closure plan to include more detail as follows:

- Provide a list of equipment (trucks, forklifts, etc.) to be decontaminated. Indicate where and how decontamination will be performed.
- Indicate the fate of the existing 30 cubic yard container. That is, will this unit be decontaminated, discarded, etc. Discuss the selected procedure in detail.
- Provide a detailed description of how contaminated soil will be removed.
- Provide a detailed description of how the decontamination rinseate will be removed, transported and disposed of.

II.B-8. Procedures for Cleaning Equipment and Structures and Removing Contaminated Soils [40 CFR 265.112(b)(4) and 265.114]

The closure plan must include decontamination procedures for personnel, equipment, structures and soils. Information regarding decontamination methods can be found in the following two references: Chapter 10 of the Occupational Safety and Health Guidance Manual for Hazardous Waste Site Activities (NIOSH, 1985) and Guide for Decontaminating Buildings, Structures and Equipment at Superfund Sites (U.S. EPA, 1985). The decontamination plan should include the following:

- Procedures to prevent contamination of clean areas.
- A listing of equipment, structures, vehicles, personnel protective gear, etc. to be decontaminated.
- The number and layout of equipment decontamination stations.
- A listing of the decontamination equipment to be used.

- A detailed description of the decontamination methods to be used. This should include a description of the method, equipment employed during the process, rationale for stopping the procedure, chemicals to be used and other pertinent information. The decontamination methods selected must be compatible with the hazardous substances being removed. The closure plan states that following scraping of the concrete surface, the concrete pad will be rinsed with water. Demonstrate that this is suitable for the types of wastes stored. Specify the type of method to be used to clean equipment.

- A demonstration that the proposed methods will provide adequate decontamination. This can be based on previous successes with the methods and accompanying documentation.

- A health and safety plan that will minimize personnel exposure during decontamination.

- Emergency decontamination procedures in the event of a release during decontamination.

- An estimate of the volume of decontamination rinseate and other contaminated materials generated during the decontamination process.

Revise the closure plan to include a health and safety plan which provides guidelines and procedures to ensure the health and safety of personnel who will be performing the decontamination of the storage facility. Refer to the following for guidance on the components of a personnel health and safety plan: OSHA regulations for hazardous waste operations (29 CFR 1910; 120, Federal Register, Vol. 51, No. 244, pp. 45654-45675) and Chapter 3 of the Occupational Safety and Health Guidance Manual for Hazardous Waste Site Activities (NIOSH, 1985). The health and safety plan should include the following:

- A description of air monitoring which will be performed during equipment and concrete surface decontamination and during contaminated soil removal.

- A description of the protective clothing and equipment, including respirators, to be worn by personnel during facility decontamination.

The closure plan states that any contaminated soil detected within the concrete pad area will be removed.

Revise the closure plan to include a plan for contaminated soil excavation and removal. For further guidance on contaminated soil excavation methods, refer to Section 7.1 of the Handbook on Remedial Action at Waste Disposal Sites, (U.S EPA, 1985a). The revised closure plan should include the following:

- o A description of the excavation and removal equipment and procedures to be used to remove the concrete pad and contaminated soil.
- o A description of the temporary staging area(s) which will be used, including details on the design, construction materials, and operation of the staging area(s).
- o A description of the on-site air monitoring which will be conducted for particulates during excavation.
- o A description of the dust suppression techniques (i.e., tarpaulins or wetting agents) which will be used during excavation.
- o A description of methods which will be used to prevent cross-contamination of soils during excavation and removal of contaminated soils.

II.B-9. Detailed Description of Removal of Hazardous Waste Residues [40 CFR 265.112(b)(4) and 265.114]

Revise the closure plan to include a detailed description of the methods used to remove, transport and dispose of decontamination rinseate, contaminated scrapings, and contaminated soil. Note that decontamination rinseate exceeding the Ohio EPA rinseate clean standards cannot be disposed in the plant's biological wastewater treatment facility. Decontamination rinseate exceeding the Ohio EPA standards is considered a hazardous waste as defined by the mixture rule [see 40 CFR 261.3(c)(2)] and must be managed as a hazardous waste. Also state in the closure plan the following information for all off-site disposal facilities:

- o Name of the facility and the EPA I.D. number.
- o The operating status of the facility (interim status or permitted facility).
- o A description of disposal methods used at the facility.

Restricted hazardous wastes are managed at this facility. Therefore, residues, rinseate and soil from decontamination operations may contain such wastes and thereby become restricted hazardous wastes by the "mixture rule." Revise the closure plan to include analysis methods to determine if these materials are restricted wastes and methods to treat or dispose of such wastes. Refer to deficiency comment I.B-4 for a further discussion of restricted waste management.

II.B-10. Methods for Sampling and Testing to Demonstrate Success of Decontamination [40 CFR 265.112(b)(4) and 265.114]

The closure plan states that decontamination rinseate from cleaning the concrete storage area will be collected within the sump and tested for phenolics, and rinse waters which test at less than 10 ppm will indicate adequate decontamination. This is not adequate. Revise the closure plan as follows:

- Based on the waste analysis (see deficiency comment II.B-6) identify all hazardous constituents of concern (i.e., all Appendix VIII constituents) contained in the wastes stored in the hazardous waste area and Process Recycle Storage Area.

- Specify that the following Ohio EPA guidance (Ohio EPA inter-office memo, October 6, 1988) will be used to demonstrate the success of decontamination of the concrete storage pad and equipment. Ohio EPA guidance specifies that the pad and equipment will be considered clean when the rinseate from cleaning each item contains no more than the following for each hazardous constituent of concern:

  - The public drinking water maximum contaminant level (MCL) for hazardous waste constituents as promulgated in 40 CFR 141.11 and OAC 3745-81-11 for inorganics and 40 CFR 141.12 and OAC 3745-81-12 for organics.

  - If a MCL is not available, then the maximum contaminant level goal (MCLG) as promulgated in 40 CFR 141.50 will be used.

  - If neither a MCL or a MCLG is available, 1 mg/l will be used.

  - If the MCL or MCLG is less than the contaminant's analytical detection limit using methods found in U.S. EPA's SW-846 (Third Edition), the SW-846 analytical detection limit will be used as the clean standard.

- For characteristic wastes, the rinseate will not be hazardous by characteristics specified in 40 CFR 261 and OAC 3745-51.

o Specify a soil sampling and testing plan based on Ohio EPA closure plan review guidance (February 8, 1988) to be used to demonstrate that all contaminated soils have been successfully removed. The sampling and testing plan must include the following:

  - The number of soil samples to be obtained and the rationale for their selection.

  - Ohio EPA guidance specifies that soils are considered "clean" as follows:

    -- For naturally occurring elements or compounds, when the concentrations in the soil are less than the mean of the background samples plus two standard deviations, or when the concentrations in the soil are less than the upper limit of the range for Ohio farm soils as specified in Ohio EPA closure plan guidance (See Ohio EPA Closure Plan Review Guidance, Feb. 8, 1988).

    -- For Appendix VIII constituents not naturally occurring in the soil, when the concentrations in the soil are below analytical detection limits using methods in U.S. EPA's SW-846 (Third Edition). State that where more than one analytical method is specified, Allied-Signal will use the method with the lowest detection limit.

Facility Name: Allied Signal, Inc., Ironton Tar Plant
Hazardous Waste Storage Facility
ID Number: OHD043730217

INTERIM STATUS CLOSURE AND POST-CLOSURE PLANS
[40 CFR 265 - Revised October 1988]

		Provided (Y/N) or NA)	Adequate (Y/N)	Exhibits (Y/N)	References and Comments
I.	GENERAL CLOSURE REQUIREMENTS				
A.	Closure Performance Standards [40 CFR 265.111]	N			See comment I.A.
B.	Content of Closure Plan				
B-1.	Description of partial and/or final closure of the facility [40 CFR 265.112(b)(1)]	Y	N	cover letter p.1 and drawings	See comment I.B-1.
B-2.	Identification of maximum extent of operations [40 CFR 265.112(b)(2)]	Y	N	pp. 1-3 and drawings	See comment I.B-2.
B-3.	Estimate of maximum inventory of hazardous waste [40 CFR 265.112(b)(3)]	Y	N	pp. 1-5	See comment I.B-3.
B-4.	Detailed description of removal of hazardous waste inventory [40 CFR 265.112(b)(3) and 265.114]	Y	N	pp. 1, 3, and 5	See comment I.B-4.
B-5.	Identification of and type of off-site hazardous waste management unit(s) [40 CFR 265.112(b)(3)]	Y	N	pp. 1, 3, and 5	See comment I.B-5.
B-6.	Decontamination and removal of hazardous waste residues [40 CFR 265.112(b)(4) and 265.114]	Y	N	pp. 1, 3	See comment I.B-6.
B-7.	Detailed description of other activities necessary for closure [40 CFR 265.112(b)(5)]	Y	N	pp 2, 3	See comment I.B-7.
B-8.	Schedule for closure of each unit and final facility closure [40 CFR 265.112(b)(6) and (7)]	Y	N	p. 2	See comment I.B-8.

Facility Name: Allied Signal, Inc., Ironton Tar Plant
Hazardous Waste Storage Facility
ID Number: OHD043730217

		Provided (Y/N) or NA)	Adequate (Y/N)	Exhibits (Y/N)	References and Comments
B-9.	Amendment of closure plan [40 CFR 265.112(c)]	N			See comment I.B-9.
B-10.	Notification of partial and final closure [40 CFR 265.112(d)(1)]	Y	Y	cover letter and p. 2	
B-11.	Schedule for beginning closure [40 CFR 265.112(d)(2)]	Y	N	p. 2	See comment I.B-11.
B-12.	Wastes treated, removed or disposed of within 90 days and extensions of time periods [40 CFR 265.113(a)]	Y	N	p. 2	See comment I.B-12.
B-13.	Closure completed within 180 days and extensions of time periods [40 CFR 265.113(b)]	Y	N	p. 2	See comment I.B-13.
B-14.	Timeframes for demonstrations for extensions [40 CFR 265.113(c)]	N			See comment I.B-14.
B-15.	Disposal or decontamination of equipment, structures, and soils [40 CFR 265.114]	Y	N	p. 4	See comment I.B-6.
C.	Certification of Closure and Survey Plat				
C-1.	Certification of closure [40 CFR 265.115]	Y	N	p. 4	See comment I.C-1.
C-2.	Survey plat [40 CFR 265.116]	NA			
D.	Closure Cost Estimate				
D-1.	Cost estimate when closure is most expensive [40 CFR 265.142(a)]	Y	N	pp. 5, 6	See comment I.D-1.
D-2.	Adjustments for inflation [40 CFR 265.142(b)]	N			See comment I.D-2.
D-3.	Revisions to closure cost estimates [40 CFR 265.142(c)]	N			See comment I.D-3.

NA = Not applicable

Facility Name: Allied Signal, Inc., Ironton Tar Plant
Hazardous Waste Storage Facility
ID Number: OHD043730217

		Provided (Y/N) or NA)	Adequate (Y/N)	Exhibits (Y/N)	References and Comments
E.	Financial Assurance for Closure [40 CFR 265.143]	N			See comment I.E.
E-1.	Closure trust fund [40 CFR 265.143(a)]	N			See comment I.E.
E-2.	Surety bond guaranteeing payment to closure trust fund [40 CFR 265.143(b)]	N			See comment I.E.
E-3.	Closure letter of credit [40 CFR 265.143(c)]	N			See comment I.E.
E-4.	Closure insurance [40 CFR 265.143(d)]	N			See comment I.E.
E-5.	Financial test and corporate guarantee [40 CFR 265.143(e)]	N			See comment I.E.
E-6.	Multiple financial mechanisms [40 CFR 265.143(f)]	N			See comment I.E.
E-7.	Financial mechanisms for multiple facilities [40 CFR 265.143(g)]	N			See comment I.E.
F.	Liability Coverage				
F-1.	Sudden accidental occurrences [40 CFR 265.147(a)]	N			See comment I.F-1.
F-2.	Non-sudden accidental occurrences [40 CFR 265.147(b)]	NA			
	o Endorsement or certification [40 CFR 265.147(b)(1)]				
	o Financial test or corporate guarantee for liability coverage [40 CFR 265.147(b)(2)]				
	o Use of multiple financial mechanisms [40 CFR 265.147(b)(3)]				

NA = Not applicable

Facility Name: Allied Signal, Inc., Ironton Tar Plant
Hazardous Waste Storage Facility
ID Number: OHD043730217

		Provided (Y/N) or NA)	Adequate (Y/N)	Exhibits (Y/N)	References and Comments
II.	CLOSURE OF CONTAINER STORAGE AREA				
A.	Closure Performance Standards for the Container Storage Area [40 CFR 265.111]	(This item is addressed under Section I-A)			
B.	Content of Closure Plan				
B-1.	Detailed description of how the container storage area will be closed [40 CFR 265.112(b)(1)]	Y	N	pp. 3, 4	See comment II.B-1.
B-2.	Identification of maximum extent of operation of container storage area [40 CFR 265.112(b)(2)]	Y	N	pp. 1-3 & drawings	See comment I.B-2.
B-3.	Estimate of maximum inventory of hazardous waste ever in the container storage area [40 CFR 265.112(b)(3)]	Y	N	pp. 1-5	See comment I.B-3.
B-4.	Detailed description of removal of hazardous waste inventory [40 CFR 265.112(b)(3) and 265.114]	Y	N	pp. 3, 5	See comment II.B-4.
B-5.	Identification of and type of off-site hazardous waste management unit(s) [40 CFR 265.112(b)(3)]	Y	N	pp. 3, 5	See comment I.B-5.
B-6.	Criteria for determining the extent of decontamination necessary[40 CFR 265.112(b)(4) and 265.114]	Y	N	pp. 1, 3	See comment II.B-6.
B-7.	Detailed description of decontamination steps [40 CFR 265.112(b)(4) and 265.114]	Y	N	pp. 3, 5	See comment II.B-7.
B-8.	Procedures for cleaning equipment and structures and removing contaminated soils [40 CFR 265.112(b)(4) and 265.114]	Y	N	pp. 3, 5	See comment II.B-8.

		Provided (Y/N) or NA)	Adequate (Y/N)	Exhibits (Y/N)	References and Comments
B-9.	Detailed description of removal of hazardous waste residues [40 CFR 265.112(b)(4) and 265.114]	Y	N	pp. 3, 5	See comment II.B-9.
B-10.	Methods for sampling and testing to demonstrate success of decontamination [40 CFR 265.112(b)(4) and 265.114]	Y	N	p. 3	See comment II.B-10.
B-11.	Detailed description of other necessary activities [40 CFR 265.112(b)(5)]	Y	N	pp. 2, 3	See comment I.B-7.
B-12.	Detailed schedule for closure of container storage area [40 CFR 265.112(b)(6)]	(This item is addressed under Section I-B-8.)			
C.	Closure Cost Estimate, Financial Assurance, and Liability Coverage [40 CFR 265.142, 265.143, and 265.147]	(These items are addressed under Sections I-D, I-E, and I-F)			

OhioEPA
State of Ohio Environmental Protection Agency
P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149

Toward A Cleaner Environment
15 Year Anniversary
1972 - 1987

Richard F. Celeste
Governor

January 24, 1989

CLOSURE PLAN DISAPPROVAL
Issuance Date JAN 24 1989
Effective Date ~~FEB 27 1989~~

CERTIFIED MAIL

RECEIVED
JAN 26 1989
U. S. EPA, REGION V
SWB — PMS

Re: Closure Plan
Allied Signal, Inc.
OHD 043 730 217/04-44-0059

Mr. R.L. Haley
Allied Signal, Inc.
Ironton Tar Processing Plant
3330 South Third St.
Ironton, Ohio 45638

Dear Mr. Haley:

On October 12, 1988, Allied Signal, Inc. submitted to Ohio EPA a closure plan for 1 hazardous waste container storage area located at 3330 S. Third Street Ironton, Ohio. The closure plan was submitted pursuant to Rule 3745-66-12 of the Ohio Administrative Code (OAC) in order to demonstrate that Allied Signal, Inc.'s proposal for closure complies with the requirements of OAC Rules 3745-66-11 and 3745-66-12.

The public was given the opportunity to submit written comments regarding the closure plan of Allied Signal, Inc. in accordance with OAC Rule 3745-66-12. The public comment period extended from October 24, 1988, to December 1, 1988. No comments were received by Ohio EPA in this matter.

Based upon review of the company's submittal and subsequent revisions, I conclude that the closure plan for the hazardous waste facility at Allied Signal, Inc. does not meet the performance standard contained in OAC Rule 3745-66-11 and does not comply with the pertinent parts of OAC Rule 3745-66-12.

The closure plan submitted to Ohio EPA by Allied Signal, Inc. is hereby disapproved (see Attachment A).

Due to the fact that the Ohio EPA is not currently authorized to conduct the federal hazardous waste program in Ohio, your closure plan also must be reviewed by USEPA. Federal RCRA closure regulations (40 CFR 265.112) require that you submit a closure plan to Lisa Pierard, Chief, Waste Management Division, Technical Programs Section, Ohio Unit, USEPA, Region V, 5HS-13, 230 South Dearborn Street, Chicago, Illinois 60604. Review and approval of the closure plan by both agencies is necessary prior to commencement of activities required by the approved closure plan.

You are notified that this action of the Director is issued as a proposed action pursuant to ORC Section 3745.07. This action will become final on the effective date indicated unless you or an objector files an appeal requesting an adjudication hearing within thirty (30) days of the date of issuance of this action. The adjudication hearing will be conducted in accordance with OAC Chapter 3745-47. The request for a hearing shall specify the issues of fact and law to be contested. Requests for hearings shall be sent to: Ohio Environmental Protection Agency, Hearing Clerk, 1800 WaterMark Drive, P.O. Box 1049, Columbus, OH 43266-0149.

A modified closure plan addressing the deficiencies enumerated in Attachment A must be submitted to the Director of the Ohio EPA for approval within thirty (30) days of the receipt of this letter in accordance with OAC 3745-66-12 and 3745-66-18. The modified closure plan should be submitted to: Ohio Environmental Protection Agency, Division of Solid and Hazardous Waste Management, Attn: Thomas Crepeau, Manager, Data Management Section, P.O. Box 1049, Columbus, Ohio 43266-0149. A copy should also be sent to: Mike Moschell, Southeast District Office, 2195 Front Street, Logan, Ohio 43138, (614)385-8501.

Sincerely,

Richard L. Shank, Ph.D.
Director

RLS/PV/ps

cc: DSHWM Central File, Ohio EPA
Lisa Pierard, USEPA, Region V
Mike Moschell, SEDO, Ohio EPA
Paul Vandermeer, DSHWM, Ohio EPA

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ATTACHMENT A
Allied Signal

1. The company shall include a topographic map or county map indicating the location of the facility in relation to surrounding topography. Allied Signal shall also provide a detailed drawing showing the unit to be closed in relation to other plant structures and features. All maps and drawings shall include a scale.

2. The rinseate sampling regime and clean levels for the pad and equipment presented in the closure plan are inadequate. Rinseate shall be sampled for the hazardous waste constituents of creosote included in Table 1, not just phenolics as stated in the closure plan. The company shall also indicate the appropriate laboratory analyses methods to be used for each hazardous waste constituent as noted in USEPA Publication SW-846 "Test Methods for Evaluating Solid Waste: Physical/Chemical Methods". The storage area and equipment shall be considered clean when the rinseate concentrations of hazardous waste constituents fall below the maximum contaminant level (MCL) as promulgated in OAC 3745-81-11 for inorganics and 3745-81-12 for organics. If an MCL is unavailable for a particular contaminant, then the maximum contaminant level goal (MCLG) shall be used as the clean standard. If neither an MCL or MCLG is available for a particular contaminant, then 1 mg/l shall be used as the clean standard. Should the MCL or MCLG fall below the contaminant's analytical detection limit (ADL) as listed in USEPA Publication SW-846, then the SW-846 ADL shall be used as the clean standard. Rinseates exceeding the above listed standard shall be managed as hazardous waste.

3. Allied Signal shall specify how rinseates will be collected after rinsing the storage area and how escape of rinseate will be prevented. The plan shall also include a steam cleaning or solvent washing of the storage area prior to rinsing with "fire water". The method of transporting rinse water for treatment shall be specified and be accompanied by a cost estimate.

4. The soil sampling/removal plan is totally inadequate. The soil areas adjacent to the storage area shall be subdivided using a sampling grid and soil samples shall be taken at each grid intersection. Allied Signal shall specify the number of soil samples to be taken. Each soil sample location shall be sampled at specific depths (6, 12, and 18 inches) using hand tools that shall be specified in the revised closure plan. Phenolic leachate testing is inappropriate for determining cleanliness of the soils. Allied Signal shall use SW-846 test methods to analyze for all hazardous constituents of the listed hazardous wastes stored in the area (i.e. creosote contains several hazardous waste constituents some of which must be tested for in the soils, see Table 1 attached). Soils shall be considered "clean" when

concentrations of hazardous organic constituents fall below their detection limits as indicated by USEPA Publication SW-846. Any soils containing concentrations of hazardous organic constituents above their SW-846 analytical detection limit must be managed as hazardous waste.

5. The closure cost estimate shall be revised to include costs added from compliance with these modifications.

6. Allied Signal, Inc. shall specify the types of personal protective equipment to be used by personnel performing closure activities. The company shall also indicate the provisions needed to protect visitors that come on-site. The closure plan shall also include procedures for decontamination of personnel and use of staging area which closure personnel and equipment use to move on and off-site. The staging area shall be used to prevent movement of contaminants to "clean" areas of the facility. Part of the staging area may be useful for decontamination of equipment and personnel as well as a dressing/preparation area for personnel performing closure.

7. An independent, registered professional engineer shall be retained to observe all critical closure activities (e.g. waste removal, soil sampling and removal, decontamination activities, rinseate sampling, etc.) and to certify that closure was conducted in accordance with the approved closure plan. The independent, registered, professional engineer's and owner/operator's certifications of closure shall follow the signature requirements found in OAC 3745-50-42. The owner/operator certification of closure shall follow the exact wording found in OAC 3745-50-42(D).

8. The closure schedule shall be revised to begin closure after the receipt of the final volume of hazardous waste, but not relying on calendar dates. (i.e. removal of inventory - day 1, decontamination days 2-3, etc).

Table 1. Constituents of creosote required for analysis of soil and rinseate samples at Allied Signal, Inc.

Acenaphthalene
Anthracene
Benz(a)anthracene
Benzo(a)pyrene
Benzo(b)fluoranthene
Benzo(k)fluoranthene
Chrysene
Dibenzofuran
Diphenylamine
Fluoranthene
Fluorene
Ideno(1,2,3-cd)pyrene
2-Methylnaphthalene
Naphthalene
Phenanthrene
Pyrene

Kearney/Centaur Division
A.T. Kearney, Inc.
P.O. Box 1438
225 Reinekers Lane
Alexandria, Virginia 22313
703 683 7932

Management
Consultants

Anita

AT KEARNEY

February 6, 1989

Ms. Pat Vogtman
Regional Project Officer
U.S. Environmental Protection Agency
Region V
230 South Dearborn Street
Chicago, Illinois 60604

Reference: EPA Contract No. 68-01-7374; Work Assignment No. R25-03-22; Allied-Signal, Inc.; Ironton, Ohio; EPA I.D. No. OHD043730217; Completeness/ Technical Review of the Hazardous Waste Storage Facility Closure Plan; Final Deliverable

Dear Ms. Vogtman:

Enclosed is the Completeness/Technical Review of the hazardous waste storage facility closure plan submitted by Allied-Signal, Inc. The project deliverables include the following:

- o General deficiency comments;
- o Specific Notice of Deficiency (NOD) comments; and
- o The completed checklist from U.S. EPA's Protocol for Evaluating Interim Status Closure/Post Closure Plans.

The following document was used for this review:

- o Closure Plan for Allied-Signal, Inc. Ironton Tar Plant, May 1981, Revised September 30, 1988.

As requested by Ed Kitchen, Ohio EPA, we have used Ohio EPA closure plan review guidance (February 8, 1988 and October 6, 1988) in conducting this completeness/technical review.

BACKGROUND

The Allied-Signal Ironton Tar Plant distills coal tar to make other products. The production processes and products were not described in the closure plan. The outdoor storage facility utilizes a 30 cubic yard

container to manage hazardous wastes. Truck ramps permit access to two sides of the container for deposition of wastes. Concrete pavement is present below the container and a roof structure has been added to cover the container. A concrete pad and sump, called the Process Recycle Storage Area, was constructed in 1982 to the southeast of the storage container. The function of the recycle area was not made clear in the closure plan. Allied-Signal intends to close the hazardous waste storage area in compliance with 40 CFR 265, and convert the status of the unit to a less than 90-day accumulation area.

GENERAL COMMENTS

Allied-Signal has not adequately described the function and regulatory status of the Process Recycle Storage Area. The waste types stored in this area were not presented. Additionally, it appears that a complete listing of hazardous wastes managed at the container unit has not been provided. This information is necessary to determine if the facility is successfully decontaminated and properly closed, and that all wastes are disposed using appropriate methods. Allied-Signal has been instructed to provide a complete waste inventory and to specify how any restricted wastes will be managed.

Allied-Signal must also provide more information regarding management of hazardous wastes during closure activities until the hazardous waste storage facility is certified closed in compliance with 40 CFR Part 265 Subpart G regulations. This is especially needed if the closure plan revisions will require closure activities to extend longer than originally estimated.

CLOSURE PLAN DEFICIENCIES

The closure plan for the hazardous waste storage facility is substantially deficient in several areas. These deficiencies are discussed in greater detail in the attached specific comments. The major deficiencies and omissions of the plan are as follows:

- Decontamination and Removal of Hazardous Waste Residues (see deficiency comments I.B-6 and II.B-6 through II.B-10).

Allied-Signal has not demonstrated that all equipment, structures and soil will be successfully decontaminated of hazardous wastes or hazardous constituents. The closure plan must be revised to contain more detailed descriptions of the decontamination procedures, health and safety plan, and sampling and analysis program to demonstrate the success of decontamination. Allied-Signal must also adopt the rinseate clean standards presented by Ohio EPA (interoffice memo dated October 6, 1988) for RCRA closures.

- o Schedule for Closure of Each Unit and Final Closure (see deficiency comment I.B-8).

  The closure schedule does not contain sufficient detail to allow tracking of the closure progress. The deficiency comments require Allied-Signal to revise the closure schedule to include additional closure activities and the corresponding schedules for those activities.

- o Closure Cost Estimate (see deficiency comment I.D-1).

  The closure cost estimate must be revised to provide more detail, based on the costs of having a third party close the facility, and address the deficiencies cited in the Completeness/ Technical Review.

- o Financial Assurance for Closure (see deficiency comment I.E).

  Allied-Signal, Inc. has not provided any financial assurance documents for the closure. The deficiency comments require such a submittal.

- o Liability Coverage (see deficiency comment I.F-1).

  The closure plan does not include liability coverage documentation for sudden accidental occurrences. The deficiency comments require documentation of this liability coverage.

If you should have any questions, please call me or the Work Assignment Manager, Pratap Singh, who can be reached at (312) 648-0111.

Sincerely,

Arthur Glazer
Technical Director

cc: A. Boseman, EPA, Region V
E. Kitchen, Ohio EPA
J. Levin
D. Bean
A. Anderson (Letter only)
P. Singh
W. Rohrer, DPRA

Enclosures

2461E-CH

Anita

Allied-Signal Inc.
Engineered Materials Sector
Ironton Tar Processing Plant
3330 South Third Street
Ironton, OH 45638
Telephone (614) 533-1040

November 2, 1988

RCRA Activities
U.S. EPA - Region V
P. O. Box A-3587
Chicago, IL 60690-3587

ATTN: Ms. Lisa Picrard ✓

RE: Withdraw of Part A Application
Allied-Signal, Inc.
OHD043730217

Dear Ms. Picrard:

As per the request of Mike Moschell - OEPA, we are submitting an additional copy of our closure plan which was submitted October 5, 1988.

Sincerely,

R. L. Haley
Plant Manager

RLH/skg
Enclosure

cc: Ohio EPA
2195 Front Street
Logan, OH 43138

ATTN: M. Moschell
(without attachment)

Anita

OhioEPA
State of Ohio Environmental Protection Agency
P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149

Richard F. Celeste
Governor

October 28, 1988

Re: Allied Signal, Inc., Ironton Tar Plant
U.S. EPA ID No.: OHD043730217
Ohio Permit No.: 04-44-0059
Closure Plan

Allied Signal, Inc., Ironton Tar Plant
Attn: R. L. Haley, Plant Manager
3330 S. Third Street
Ironton, Ohio 45638

Dear Sir:

A public notice acknowledging the Ohio EPA's receipt of a closure plan for Allied Signal, Inc., Ironton Tar Plant located at 3330 S. Third St., Ironton, Ohio 45638 will appear the week of October 24, 1988, in the Ironton Tribune, Ironton, Ohio. The Director of the Ohio EPA will act upon the closure plan request following the close of the public comment period, December 1, 1988.

Copies of the closure plan will be available for public review at the Briggs Lawrence County Library, 321 S. Fourth Street, Ironton, Ohio 45638 and the Ohio EPA, Southeast District Office, 2195 Front Street, Logan, Ohio 43138.

Please contact me at (614) 644-2934, if you have any questions concerning this matter.

Very truly yours,

Thomas E. Crepeau

Thomas E. Crepeau, Manager
Data Management Section
Division of Solid & Hazardous Waste Management

TEC/dhs

cc: Rebecca Strom, U.S. EPA, Region V
Randy Meyer, Ohio EPA, DSHWM, TA&ES
Mike Moschell, Ohio EPA, DSHWM, SEDO

2215R(85)

CONVERSATION RECORD

TIME 11:45 am | DATE 7-07-88

TYPE: ☐ VISIT ☐ CONFERENCE ☑ TELEPHONE ☐ INCOMING ☑ OUTGOING

Location of Visit/Conference:

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU	ORGANIZATION (Office, dept., bureau, etc.)	TELEPHONE NO.
Mike Mosckell	OEPA-SEDO	614-385-8501

ROUTING

NAME/SYMBOL	INT

SUBJECT: Allied Signal (Allied Chemical)
OHD043730217

SUMMARY

(1) TOI tank listed in Part A (1980); closed 1984 approved closure plan
(2) new TOI (not yet listed) was for treatment of 1500 from offsite to get waste back
(3) interim status permit from the state in 1980
(4) must go thru closure
(5) will submit a closure plan in a few weeks
(6) so, disregard letter requesting Part A withdrawal

ACTION REQUIRED

NAME OF PERSON DOCUMENTING CONVERSATION	SIGNATURE	DATE
AJB		7-07-88

ACTION TAKEN

SIGNATURE	TITLE	DATE

INTER-OFFICE COMMUNICATION

TO Distribution DATE May 4, 1984

FROM: Anthony Sasson, TA&WM Section, DSHWM

SUBJECT: Allied Chemical, Ironton Tar Processing Plant Storage Tank Closure (Partial), #04-44-0059, OHD043730217 G, TSD, PA

The above partial closure of a 12,200 gallon storange tank was completed April 25. The tank was used for storage of cyclohexanone (F003) wastewater and was included in the federal Part A filing under interim status. It was also included in the state HWFAB permit.

An initial closure plan for this stroage tank was received by Ohio EPA on September 6, 1983. DHMM requested a revised closure plan, which was received November 14, 1983. Public notice of this closure plan appeared the week of November 21, and no comments were received. The plan was reviewed by both DHMM and DWPC and was approved by the Director on January 27, 1984.

Closure was conducted and appropriate certifications of closure, dated April 27, 1984, were receved by Ohio EPA on April 30, 1984.

The current status for Allied Chemical is generator and container storage facility. This closure will result an Ohio permit revision that will not require HWFAB action. This will also result in a change in federal interim status.

P&MR Section should officially notify U.S. EPA of this change as soon as possible.

AS/sc

cc: Mike Moschell, SEDO
Tom Crepeau, P&MR Section, DSHWM
Tim Lawrence, Engineering Section, DSHWM

0296U

MAKE COPY FOR PART A FILE

OhioEPA

January 27, 1984 reg

OHD043730217

Mr. C. L. Davidson, Plant Manager
Allied Chemical Corp. Ironton TAR plant
3330 S. Third Street
Ironton, OH 45638

I certify this to be a true and accurate copy of the official document as filed in the records of the Ohio Environmental Protection Agency.

By: Dinah Davis Date 1/27/84

Dear Mr. Davidson:

On November 14, 1983, Allied Chemical Corp. submitted to Ohio EPA a closure plan for its hazardous waste storage tank at 3330 S. Third Street in Ironton. The closure plan was submitted pursuant to Rule 3745-66-12 of the Ohio Administrative Code (OAC) in order to demonstrate that Allied Chemical Corporation's proposal for closure complies with the requirements of OAC Rules 3745-66-11 and 3745-66-12.

The affected public was given the opportunity to submit written comments regarding the closure plan of Allied Chemical Corp. in accordance with OAC Rule 3745-66-12. No comments were received by Ohio EPA in this matter.

Based upon review of the company's submittal and subsequent revisions, I conclude that the closure plan for the hazardous waste facility at 3330 S. Third Street in Ironton meets the performance standard contained in OAC Rule 3745-66-11 and complies with the pertinent parts of OAC Rule 3745-66-12.

The closure plan submitted to Ohio EPA by Allied Chemical Corporation on November 14, 1983 is hereby approved, with the following modification:

> Allied Chemical shall contact the Southeast District Office of Ohio EPA at least two business days prior to transfer of the cyclohexanone waste to the plant's wastewater treatment system.

You are notified that this action of the Director is final and may be appealed to the Environmental Board of Review pursuant to Section 3745.04 of the Ohio Revised Code. The appeal must be in writing and set forth the action complained of and the grounds upon which the appeal is based. It must be filed with the Environmental Board of Review within thirty (30) days after notice of the Director's action. A copy of the appeal must be served on the Director of the Ohio Environmental Protection Agency and the Environmental Law Division of the Office of the Attorney General within three (3) days of filing with the Board. An appeal may be filed with the Environmental Board of Review at the following address:

RECEIVED
FEB 01 1984
WASTE MANAGEMENT BRANCH

Environmental Board of Review
250 E. Town St.
Room 101
Columbus, Ohio 43215

Ohio Environmental Protection Agency
ENTERED DIRECTOR'S JOURNAL
JAN 27 1984

When closure is completed, the Ohio Administrative Code Rule 3745-66-15 requires the owner or operator of a facility to submit to the Director of the Ohio EPA certification by the owner or operator and a registered professional engineer that the facility has been closed in accordance with the approved closure plan. These certifications should be submitted to:

Ohio Environmental Protection Agency
Division of Hazardous Materials Management
Attn: Thomas E. Crepeau, Manager
Permits & Manifest Records
P.O. Box 1049
Columbus, Ohio 43216-1049

Sincerely,

Robert H. Maynard
Director

RHM/bsr
82000.0

cc: Tom Crepeau, DHMM
Tom Carlisle, DHMM
Tim Lawrence, DHMM
Jim Mayka, U.S. EPA, Region V
Mike Moschell, SEDO

Ohio Environmental Protection Agency
ENTERED DIRECTOR'S JOURNAL

JAN 27 1984

I certify this to be a true and accurate copy of the official document as filed in the records of the Ohio Environmental Protection Agency.

By: Donna Davis Date 1/27/84

OhioEPA

Re: Lawrence County
Allied Chemical Corporation
Ironton Tar Plant
Hazardous Materials

Allied Chemical Corporation
Ironton Tar Plant
3330 South Third Street
Ironton, Ohio 45638

June 28, 1982

Attention: Mr. C.L. Davidson

Dear Sir:

On June 23, 1982, this office received from you a copy of your facility's closure plan and verification that several minor problems found in my inspection of March 24, 1982 had been corrected.

I have only one comment on your closure plan, as it pertains to your former landfill area. Even though use of this area was discontinued before RCRA, and it is not covered under our regulations, I would suggest that a statement be placed in the property deed that this area does contain hazardous materials. This would serve to notify future land users of the potential problems associated with excavation or construction on this site.

There are areas on this site where some tar has surfaced, and I would assume this problem would be corrected under Phase III of your clean up plan, for removing contaminated soils.

I agree with you that your contingency plan is too large of a volume to reproduce.

Thank you for your cooperation in this matter. Please call if I may be of service to you.

Sincerely,

Michael Moschell
Environmental Scientist
Division of Hazardous Materials Management

MM:dm

cc: Paula Cotter, DHMM, C.O.
cc: Bob Fragale, HWFAB
cc: Kathy Homer, USEPA, Region V

CLOSURE PLAN

FOR

ALLIED-SIGNAL, INC.

IRONTON TAR PLANT

EPA FACILITY I.D. NO. OHDO43730217

APPROVED: R. L. Haley

R. L. Haley,
Plant Manager

Original Issue: 5/81
Revised: 2/14/89

CLOSURE PLAN
INDEX

ATTACHMENTS

ALLIED-SIGNAL, INC.
ENGINEERED MATERIALS
TAR PRODUCTS

CLOSURE PLAN OUTLINE FOR CONTAINER STORAGE FACILITY

EPA Facility I.D. No: OHDO43730217

Location: Ironton, Ohio

Address and Phone No: 3330 South Third Street

Ironton, Ohio 45638

614-533-1040

I. General Facility Information

A. The container storage area is located generally west of the main processing area of the plant and south of a former research test building. Refer to Attachment I for an area Topographic map and both general and detailed Facility Drawings.

B. Process Recycle Storage Area: A new concrete pad & sump on the southeast side of the solid waste storage area (Item A) was installed 1st Quarter 1982. Rainwater collected from area will be transferred to the plant's biological treatment facility.

C. Hazardous Waste Storage Area: Portable container box, rectangular in shape, with concrete rampways on both sides to permit truck access for dumping into box. A roof structure over the solid waste container was installed in 1st Quarter 1982, to prevent rainwater collection in container.

D. The capacity of the container box is 30 cubic yards.

E. The waste material is composed of varying amounts of tar and related materials with added inert absorbents, such as slag or packaged material. It is solid in form and contains sludge from Creosote production K035, Creosote U051, and Naphthalene U165. In compliance with the Landfill ban of August 8, 1988, creosote waste will be segregated from the 30 yd storage container and shipped off-site for incineration within 90 days of accumulation.

I. General Facility Information (cont.)

E. (cont.)

Process waste is generated during the distillation of coal tar in a number of ways including:

1. Cleanup of process leaks and spills due to equipment malfunction.

2. Sludge that accumulates in storage tanks and is subsequently removed.

3. Disposal of minor quantities of operating-maintenance supplies, lubricants, solvents, paint and slag.

4. Disposal of scrap materials from mechanical repairs containing hazardous materials.

F. The maximum number of hazardous waste containers in the storage area is (1) 30 Yd Roll-Off Container.

II. Closure Schedules

General Closure Compliance Schedule

February 25, 1989	Submit revised closure plan to EPA Regional Administrator 180 days prior to start of closure.
August 24, 1989	Initiate Closure once plan is approved.
November 22, 1989	Complete Closure within 90 days from plan approval.

Final Closure Schedule

Time Period	Closure Activity
Day 1-5	Initiate cleanup of storage area and remove final volume of waste.
Day 6-7	Decontaminate concrete storage area and submit rinseate samples for analysis.

II. Closure Schedules (cont.)_

Final Closure Schedule

Time Period	Closure Activity
Day 8	Collect soil samples from specified areas and submit all samples for analysis.
Day 8-43	Laboratory to complete analysis as required.
Day 44-45	Complete additional decontamination of storage pad and submit additional rinseate and soil samples as may be required.
Day 45-73	Laboratory to complete final analysis.
Day 74-80	Decontaminate surrounding areas as required and ship off soil for disposal at a hazardous waste landfill.
Day 80-90	Complete closure. Additional days may be required since no closure activities are scheduled on weekends.

III. Closure Plan

Phase I - Removing All Inventory

A. The 30 Yd. Roll-off container will remain at an alternate plant site for collection of plant waste and cleanup residues from closure activities. After all waste materials are collected, the waste container will be shipped off-site to a landfill. Waste accumulated within this area hereafter, will be shipped off-site for disposal within 90 days of accumulation.

Phase II - Decontamination of the Facility

Personal Protection

Personal protective equipment to be used by personnel working on closure activities and/or visitors will consist of the standard long sleeve shirts, safety glasses and shoes, and a hard hat. Additional protection for workers

III. Closure Plan (cont.)

Phase II - Decontamination of the Facility (cont.)

Personal Protection (cont.)

will also include skin cream barriers, rubber boots and gloves, and disposable coveralls to minimize exposure. Although we have no expectation that respirators will be required due to the relative non-volatility of coal tar components, we will test the atmosphere with an Organic Vapor Analyzer during field sampling activities. If a result greater than 5 ppm is obtained, respirators will be provided for sampling crews in the immediate area.

Decon Staging Area

A staging area will be set up to provide sufficient room for decontamination of equipment or personnel as may be required prior to leaving the work site. This will consist of a plastic liner on the ground adjacent to the concrete storage pad which will prevent movement of contaminates from the site. Based on the nature of the waste material the risk of contamination is relatively low and can be easily controlled. Equipment can be wiped clean with rags as may be required and collected for disposal. Contaminated boots, gloves, coveralls, etc. will also be collected within the decon zone for disposal along with the plastic liner after closure with the plant's hazardous waste.

Shower facilities and a steam room are provided for all employees and can also be utilized by anyone who may need decontamination.

Decontamination of the Facility

The initial cleaning of the concrete storage pad area and sump will consist of scraping all residues off and using absorbent material as required. After the initial cleaning, a hot water jet with 1800 psi will be utilized to clean the concrete pad. To prevent escape of any rinseate from the area, sandbags will be used on the outside perimeter where required and the contractor will be instructed to direct all washings towards the drainage sump. The concrete storage pad area is sloped towards the sump and is also provided with a 2" curb and ramp at the entrance to provide containment. It is anticipated that approximately 8000 gallons will be used to clean this storage area and drainage sump.

III. Closure Plan (cont.)

Phase II - Decontamination of the Facility (cont.)

Decontamination of the Facility (cont.)

The 1800 psi hot water wash is expected to be sufficient for cleaning this area. This can be accomplished without any risk of solvent spillage and will also minimize personal exposure to volatiles which would occur with either solvent or steam cleaning methods

Collection and Treatment of Rinseate

All rinseate will be removed from the sump by a vacuum truck (~2000 Gal capacity) and transfered to the plant's biological wastewater treatment facility. Rainwater is routinely transfered from the storage pad sump for treatment as required. Our biological treatment facility currently treats similar wastewater contaminates at much greater concentrations and has sufficient capacity to handle all the washings.

Rinseate Analysis

The final volume of rinseate collected in the sump (capacity ~2700 Gals) will be sampled for analysis for those parameters listed in Attachment II. Since there are no maximum contaminant levels (MCL) or maximum contaminant level goals (MCLG) established for these parameters, then a result of 1 mg/l will be the clean water standard as per OEPA's recommendation of January 24, 1989. Analysis for the creosote constituents listed in Attachment II will be adequate to establish when decontaminate is completed. Inorganic and organic chemical analysis according to OEPA regulations 3745-81-11 and 12 respectively is not necessary since prior analysis have shown that our raw materials and waste products contain pesticides and heavy metals in concentrations well below the allowable levels.

This area will remain closed until analysis of the rinseate is completed. If significant contamination still remains additional washing of the area will be completed and another sample submitted for analysis. Otherwise, the initial cleaning should be more than adequate with continued waste handling in this area after closure.

III. Closure Plan (cont.)

Phase III Decontamination of Surrounding Area

The surrounding area is not suspected to be contaminated since all waste materials are stored in a contained area. If any samples indicate contamination than that zone will be excavated for disposal at a hazardous waste landfill.

Soil Sampling & Analysis

Soil sampling will be conducted at site locations at the front of the 30 Yd Waste container and on the up-river end of the concrete storage pad. Refer to attachment I-C for location of the soil sampling sites. The soil sampling grids and composite samples will be established according to USEPA's Report No. 560/5-86-017, "Field Manual For Grid Sampling of PCB Spill Sites to Verify Cleanup." Each soil sample location will be collected and composited for each depth of 6, 12 and 18 inches as specified by the sample grid location in Attachment III.

The first samples proposed for analysis at the up-river end of the storage pad (Attachment III-A) would involve a composite of samples #1-7 collected at the 6 inch depth. Based on the results, additional analysis would involve a composite of each the 12 or 18 inch depth for samples #1-7 and analysis of composites #8-15 for each depth as may be required to determine the decontamination zone.

A composite sample analysis for samples #1-7 at the front of the waste container will first be conducted for the 6 inch depth and will proceed to the 12 and 18" depth if required. Refer to Attachment III-B for the sample grid location.

Soil samples will be collected with a standard sampling trier and/or similar sampling device. The samples will be wiped clean after each sample to prevent cross contamination.

Clean Soil Standards

The specification that soil concentration must be at levels below the detection limits of method SW-846 implicitly incorporates a technical presumption. Requiring soils to have such concentrations assumes that they are the result of spills or other hazardous waste losses. As a

III. Closure Plan (cont.)

Clean Soil Standards (cont.)

consequence of the "mixture/derived from" rules, it might be interpreted that a non-detectable concentration is required.

We have no information in our operating record that indicates that such hazardous waste losses occurred. As a consequence, we believe that the most correctly applied criteria would be to test surrounding soils for hazardous waste characteristics.

In view of the closure schedule incorporated into Part II of the closure plan it would appear that the Toxicity Characteristic Leaching Procedure will have been promulgated by that time. As a consequence our revised closure plan now indicates that soils which do not satisfy the (then) analytical criteria for waste characteristics will be managed as hazardous waste and disposed accordingly.

Phase IV Closure Certification

An independent, registered professional engineer will be retained to observe all critical closure activities such as waste removal, soil sampling and removal, decontamination activities, rinseate sampling, etc. and to certify that closure was completed according to the approved closure plan.

Items to be completed are as follows:

A. Signs will be removed and inspection logs closed upon certification.

B. The professional engineer will provide a certification as to adherence with the approved closure plan.

C. Allied will complete the certification as included in Attachment IV.

D. Partial Closure Contingency Plan.

Waste accumulation dates are posted for all waste materials as received at the process waste container area. In event that the hazardous waste permit expires or the facility is under partial closure, all waste materials will be removed from storage within 90 days for treatment or disposal.

III. Closure Plan (cont.)

Phase IV Closure Certification (cont.)

D. Partial Closure Contingency Plan (cont.)

The waste management program is as follows:

1. 30 YD Process Waste Container: A sign is located adjacent the container to post initial dates of accumulation for each container.

2. Misc. Waste Material Containers: Each container placed into storage will be dated and recorded on a waste inventory log sheet.

CLOSURE COSTS
CONTAINER/DRUM STORAGE AREAS

Phase I — Removing Inventory

Off-site disposal estimate, or on-site treatment.

1.	Packaging cost - bulk or special containers, if necessary.	$ ----
2.	Trucking cost to facility (Identify TSD) WAYNE DISPOSAL.	$ 1,000.00
3.	Disposal charge at the facility.	$ 6,000.00
	SUB-TOTAL COST	$ 7,000.00

Phase II — Cleansing Tank Facilities

1.	Cost of contract cleaning or of rental equipment (e.g., steamcleaning, hydroblasting, or sandblasting) and labor.	$ 6,400.00
2.	Cost of disposal of residues from cleaning.	$ 4,400.00
3.	Scrap value (reduces cost, if applicable) (-)	$ ----

Phase III — Removing Contaminated Soils (If Required)

1.	Cost to determine if areas around tank facilities are contaminated with hazardous wastes.	$ 12,200.00
2.	Contaminated area in cubic yards to be removed: 2 C.Y.	
3.	Excavation, trucking cost to disposal site, disposal cost at site.	$ 2,000.00
	SUB-TOTAL COST	$ 14,200.00

Phase IV — Closure Certification

	Estimate cost of having a registered professional engineer make the necessary inspections and certifications.	$ 1,600.00
	ESTIMATE OF CLOSURE COST FOR CONTAINER FACILITY	$ 33,600.00

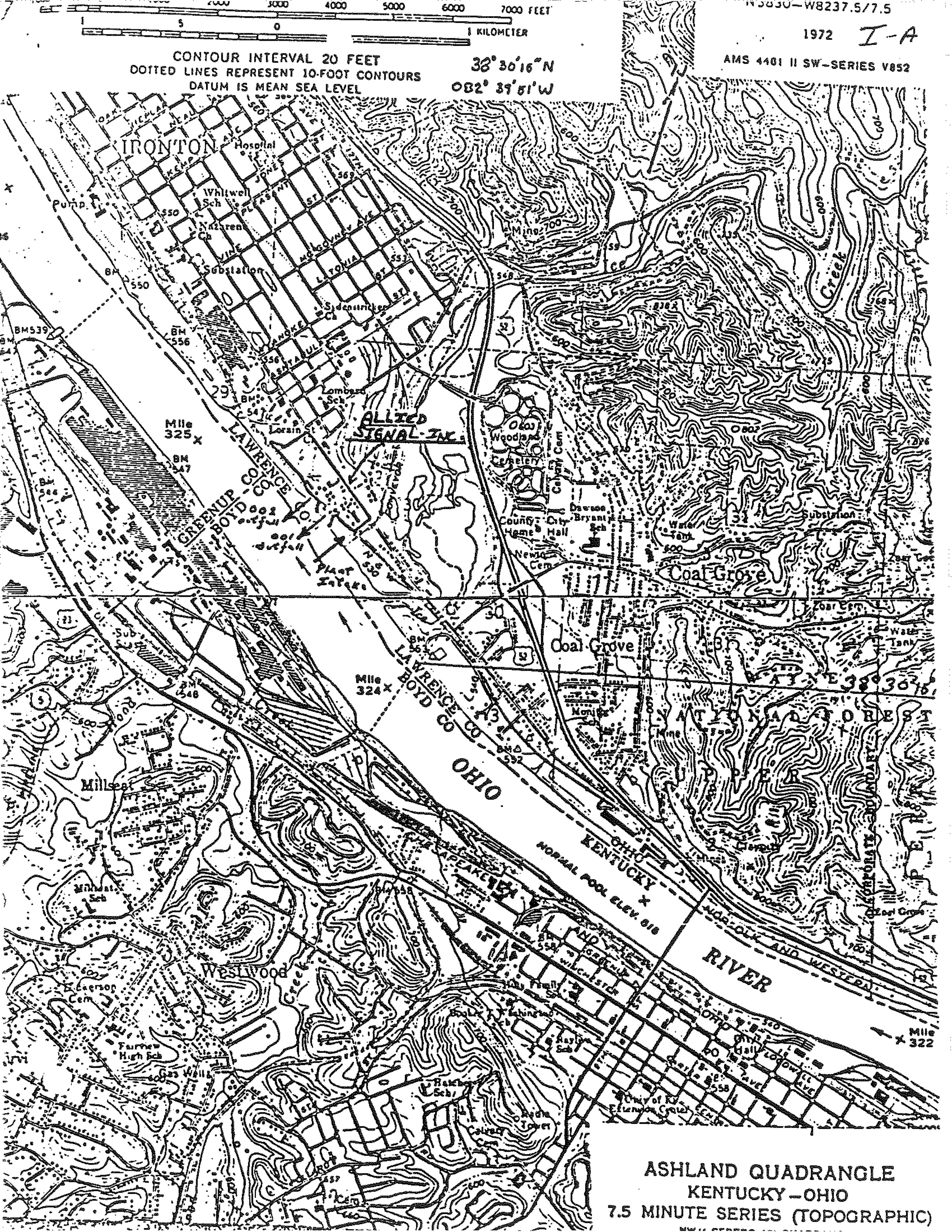
N3830—W8237.5/7.5

1972 I-A

AMS 4461 II SW—SERIES V852

CONTOUR INTERVAL 20 FEET
DOTTED LINES REPRESENT 10-FOOT CONTOURS
DATUM IS MEAN SEA LEVEL

38°30'16"N
082°39'51"W

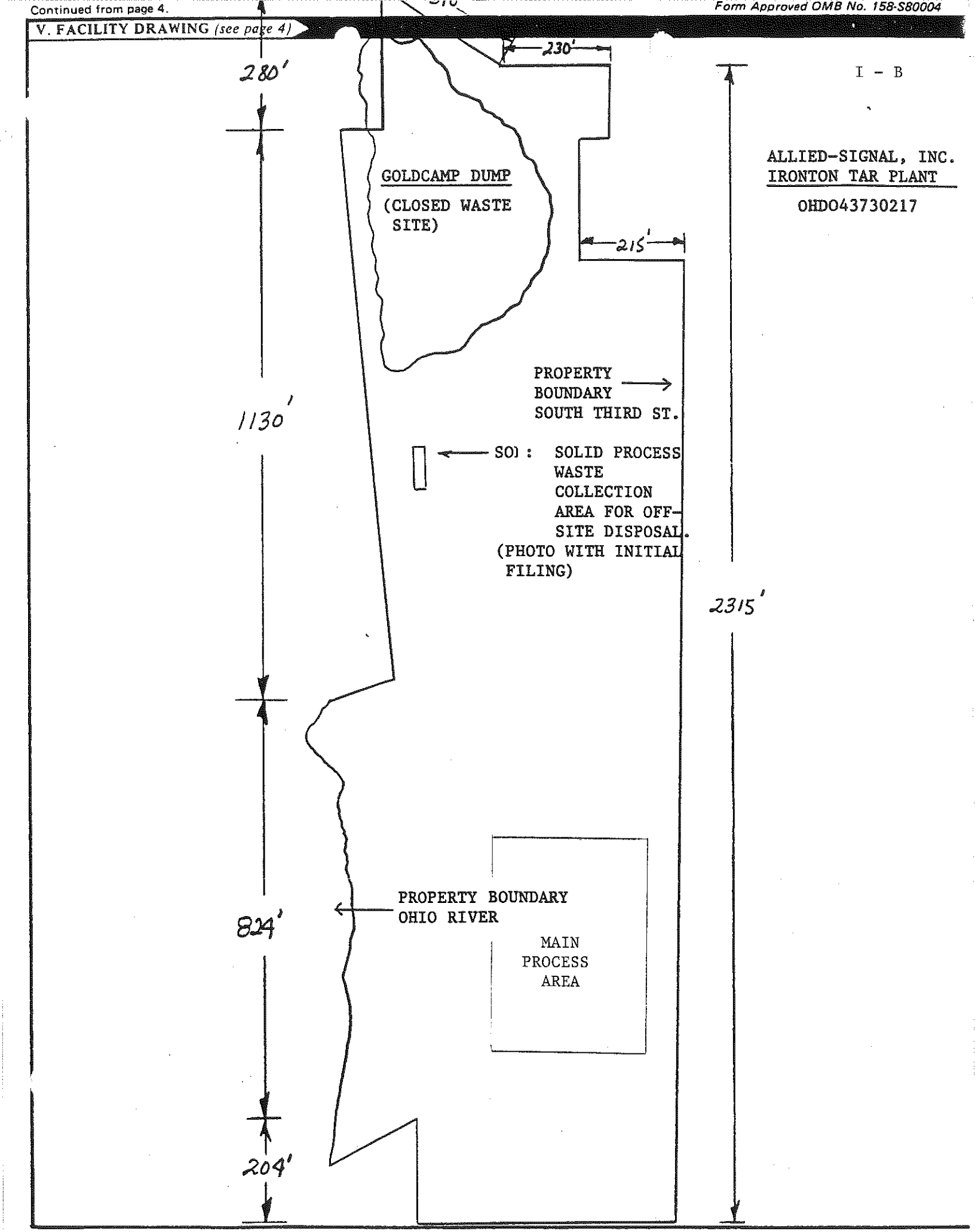


2000 3000 4000 5000 6000 7000 FEET
1 KILOMETER
IRONTON
Hospital
Whitwell Sch
Nazarene Ch
Substation
Sidenstricker Ch
Lombard Sch
Lorain
ALLIED SIGNAL INC.
Mile 325
LAWRENCE CO
BOYD CO
GREENUP CO
outfall
Plant Intake
Woodland Cemetery
Calvary Cem
County Home
City Hall
Dawson Bryant Sch
Newton Cem
Water Tank
Substation
Coal Grove
Zoar Cem
Mile 324
OHIO
KENTUCKY
NORMAL POOL ELEV. 515
RIVER
NORFOLK AND WESTERN
CHESAPEAKE
NATIONAL FOREST
UPPER
CORPORATE BOUNDARY
Millseat
Westwood
Creek
Fairview High Sch
Gas Wells
Hatcher Sch
Calvary Cem
Radio Tower
Booker T. Washington Sch
City Hall
Univ of Ky Extension Center
Mile 322

ASHLAND QUADRANGLE
KENTUCKY—OHIO
7.5 MINUTE SERIES (TOPOGRAPHIC)

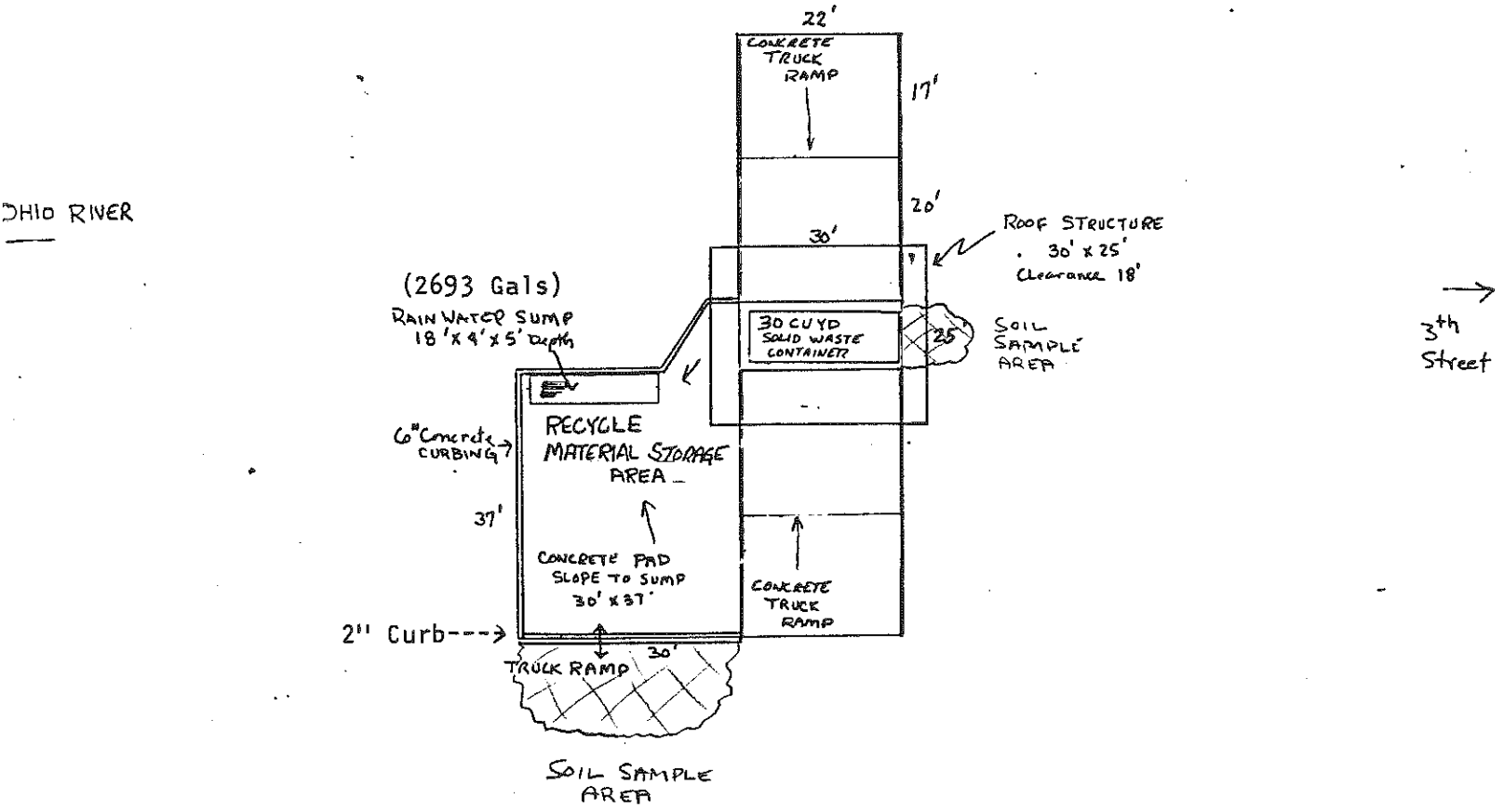
Form Approved OMB No. 158-S80004

V. FACILITY DRAWING *(see page 4)*



Allied-Signal Inc.
Engineered Materials Sector
Ironton Tar Processing Plant
3330 South Third Street
Ironton, OH 45638
Telephone (614) 533-1040

ATTACHMENT I-C
STORAGE FACILITY DRAWING



ATTACHMENT II

HAZARDOUS WASTE CONSTITUENTS

Constituents	Practical Quantitation Limits, ppb
Acenaphthalene	660
Anthracene	660
Benz (a) Anthracene	660
Benzo (a) Pyrene	660
Benzo (a) Fluoranthene	660
Benzo (k) Fluoranthene	660
Chrysene	660
Dibenzofuran	660
Diphenylamine	No Detection Limit Established
Fluoranthene	660
Fluorene	660
Ideno (1, 2, 3 -cd) Pyrene	660
2-Methylnaphthalene	660
Naphthalene	660
Phenanthrene	660
Pyrene	660

Test Methods: EPA Test Method 8270 - Semivolatile organic compounds analysis for both water and soil samples will be conducted according to test methods required per USEPA Publication SW-846.

Sample Preservation: All samples will be refrigerated at 4 C for holding prior analysis.

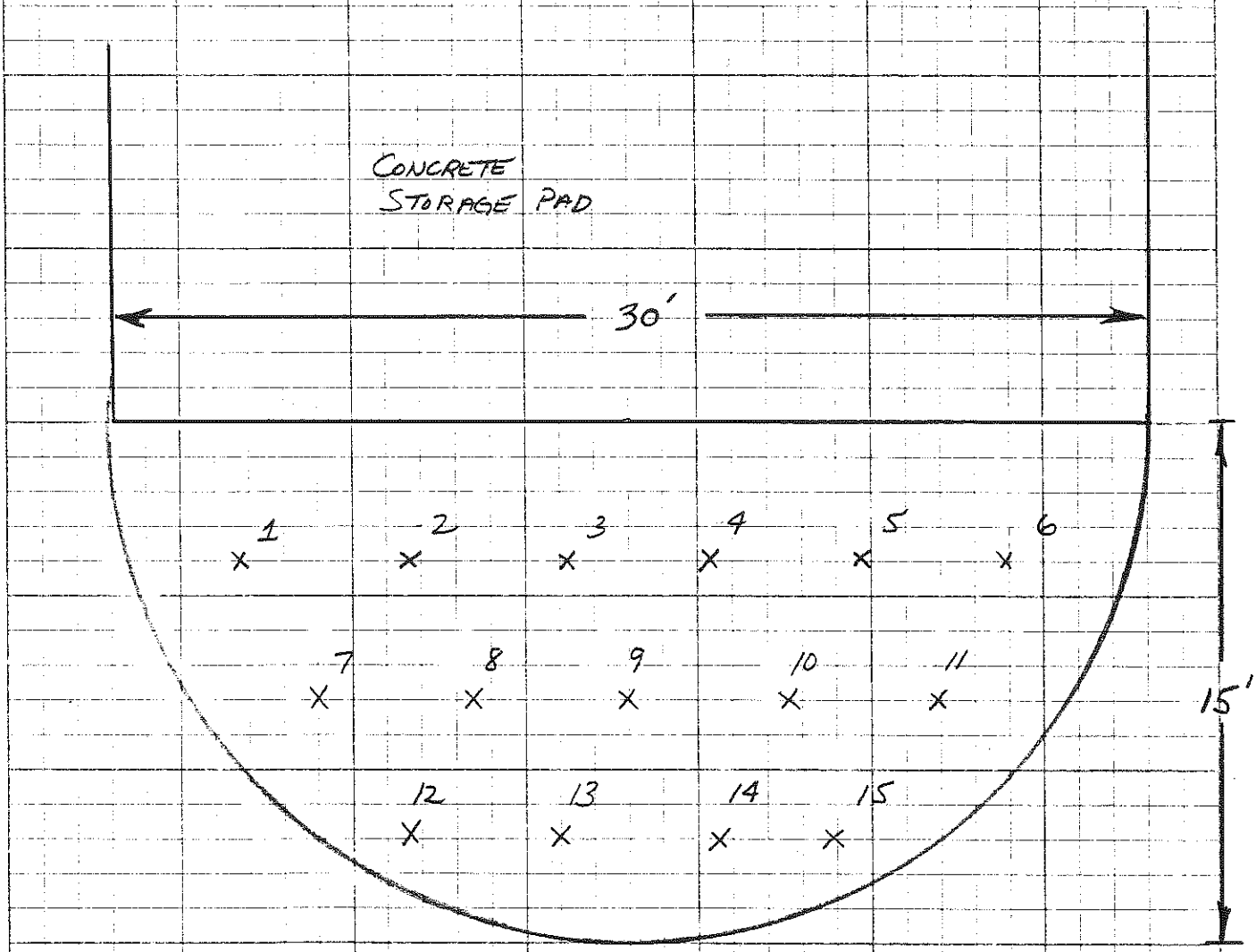
Sample Containers: All wastewater samples will be collected in a 2 liter glass container and soil samples in metal cans.

Sample Methods: a) Wastewater - representative samples will be collected from the drainage sump and composited in a 2 liter container. b) Soils - a typical carbon steel sampling trier with a length of approximately 24-40" and .5 to 1/2 inch in diameter will be used to collect core samples.

ATTACHMENT III-A

SOIL SAMPLE LOCATIONS

UP RIVER END OF STORAGE PAD



X - SAMPLE LOCATIONS
AT 6, 12, 18 INCH DEPTHS

COMPOSITE SAMPLES TO BE COLLECTED FOR EACH 6, 12, 18 INCH DEPTH

COMP. SAMPLE	SAMPLE SITES
#1	#1 - 7
#2	#8 - 15

DIST. BETWEEN ADJ. POINTS

$S = .30r = .30(15) = 4.5'$

DIST. BETWEEN SUCCESSIVE ROWS.

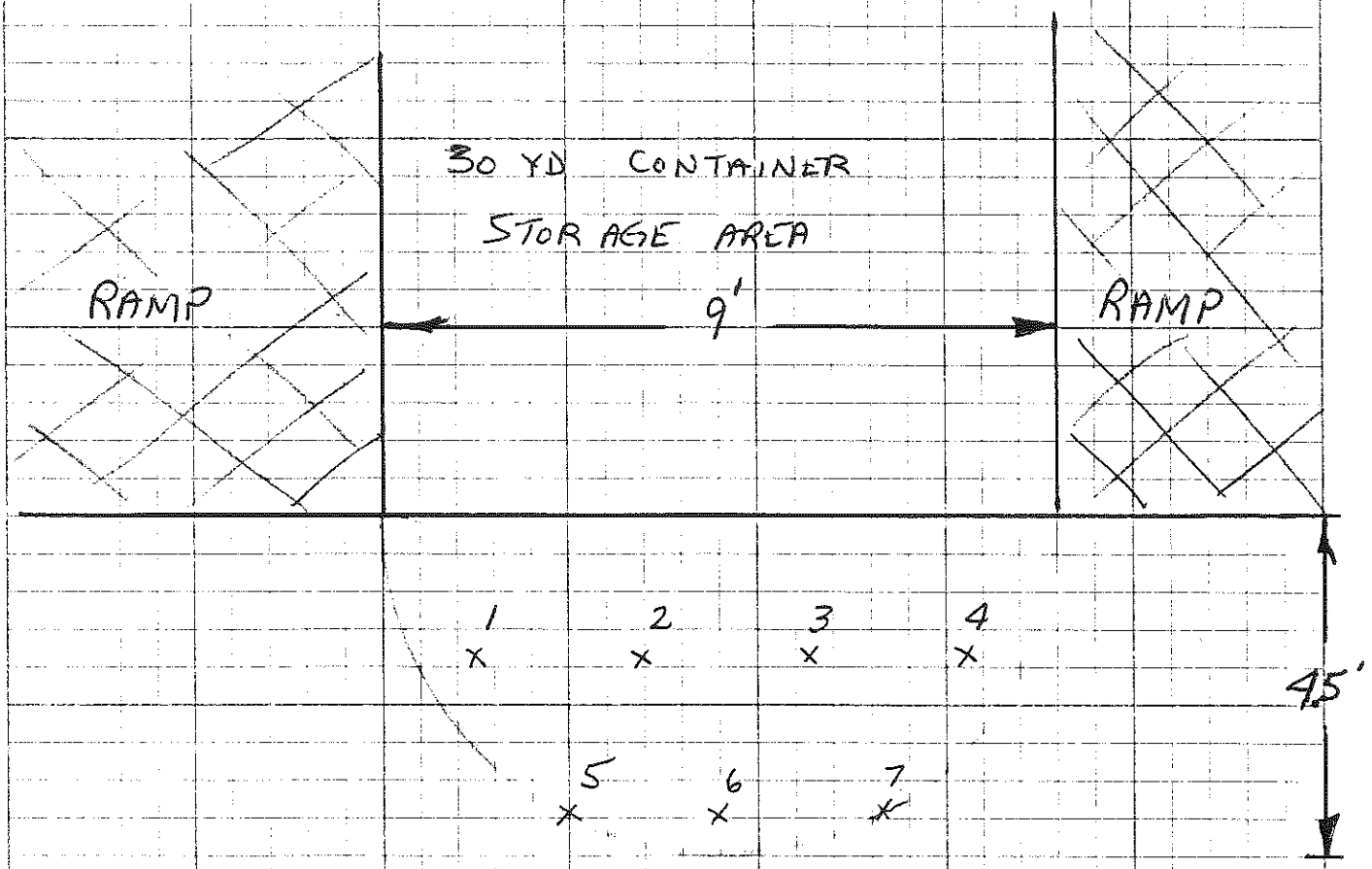
$U = .26r = .26(15) = 4'$

SCALE: 1CM = 1.96'
1 BLOCK = 1'

ATTACHMENT III-B

SOIL SAMPLE LOCATIONS

STREET SIDE OF WASTE CONTAINER



ONE COMPOSITE SAMPLE TO BE COLLECTED FOR EACH 6, 12, 18 INCH DEPTH.

DIST. BETWEEN ADJ. POINTS

$S = .48r = .48(4.5) = 2.2'$

DIST. BETWEEN SUCCESSIVE ROWS

$U = .42r = .42(4.5) = 2'$

SCALE 1 CM = .98'
1 BLOCK = .5'

ATTACHMENT IV

CLOSURE CERTIFICATION

Facility: Allied-Signal, Inc.
3330 South Third Street
Ironton, OH 45638
EPA I.D. No. OHDO43730217

Date Closure
Plan Approved By: OEPA _____

USEPA _____

Date Closure Completed: _____

Owner Certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

_____ _____
G. H. Collingwood Date
Vice President

cc: USEPA
Region V, 5HS-13
230 South Dearborn Street
Chicago, IL 60604
ATTN: Lisa Pierard, Chief Waste Mgn. Division, Technical Programs Section

Ohio EPA
Southeast District Office
2195 Front Street
Logan, OH 43138
ATTN: Mike Moschell

Ohio EPA
Division of Solid & Hazardous Waste Mgn
P. O. Box 1049
Columbus, OH 43266-0149
ATTN: Thomas Crepeau, Manager Data Mgn Section

CLOSURE PLAN

FOR

ALLIED-SIGNAL INC.

IRONTON TAR PLANT

EPA FACILITY I.D. NO. OHDO43730217

APPROVED: R.L. Haley

R. L. Haley,
Plant Manager

Original Issue: 5/81
Revised: 9/30/88

CONTENTS

ATTACHMENTS

ALLIED CHEMICALS CORPORATION
CHEMICALS COMPANY
TAR PRODUCTS

CLOSURE PLAN OUTLINE FOR CONTAINER STORAGE FACILITY

EPA Facility I.D. No: OHDO43730217

Location: Ironton, Ohio

Address and Phone No: 3330 South Third Street

Ironton, Ohio 45638

614-533-1040

I. General Facility Information

A. The container storage area is located generally west of the main processing area of the plant and south of a former research test building. See location marked on attached sketch.

B. Process Recycle Storage ARea: A new concrete pad & sump on the southeast side of the solid waste storage area (Item A) was installed 1st Quarter 1982. Rainwater collected from area will be transferred to the plant's biological treatment facility.

C. Hazardous Waste Storage Area: Portable container box, rectangular in shape, with concrete rampways on both sides to permit truck access for dumping into box. A roof structure over the solid waste container was installed in 1st Quarter 1982, to prevent rainwater collection in container.

D. The capacity of the container box is 30 cubic yards.

E. The waste material is composed of varying amounts of tar and related materials with added inert absorbents, such as slag or packaged material. It is solid in form and contains sludge from Creosote production K035, Creosote U051, and Naphthalene U165. In compliance with the Landfill ban of August 8, 1988, creosote waste will be segregated from the 30 yd storage container and shipped off-site for incineration within 90 days of accumulation.

I. General Facility Information (cont.)

E. (cont.)

Process waste is generated during the distillation of coal tar in a number of ways including:

1. Cleanup of process leaks and spills due to equipment malfunction.

2. Sludge that accumulates in storage tanks and is subsequently removed.

3. Disposal of minor quantities of operating-maintenance supplies, lubricants, solvents, paint and slag.

4. Disposal of scrap materials from mechanical repairs containing hazardous materials.

F. The maximum number of hazardous waste containers in the storage area is (1) 30 YD Roll-Off Container.

II. Closure Schedules

General Closure Compliance Schedule

October 7, 1988	Submit final closure plan to EPA Regional Administrator 180 days prior start of closure.
April 5, 1989	Initiate Closure
July 4, 1989	Complete Closure within 90 days from plan approval.

Schedule of Final Closure - Storage> 90 Days

A. Estimated year of Closure: 1989
B. Final date waste will be added to container: April 12, 1989
C. Date that all inventory has been removed for off-site disposal: April 12, 1989
D. Final date facility decontaminated: April 14, 1989
E. Date Closure completed for > 90 Day Storage: April 14, 1989
F. Time to close facility: 10 Days

III. Closure Plan

Phase I - Removing All Inventory

A. The 30 yd Roll-off container will remain on-site for collection of plant waste and cleanup residues from closure activities. After all waste materials are collected, the waste container will be shipped of-site to a landfill. Waste accumulated within this area hereafter, will be shipped off-site for disposal within 90 days of accumulation.

Phase II - Decontamination of the Facility

A. The concrete pad under the 30 yd waste container and the adjacent recycle material storage area will be scraped clean and oil absorbents used to remove all waste residues for disposal. In addition, all wastewater collected within the rainwater sump will be removed for treatment via the plant's biological wastewater treatment facility and the sump scraped clean to remove any sludge.

B. The surrounding area is not suspected to be contaminated since all waste materials are stored in a totally contained area. However, any contaminated soil detected within the area will be removed and soil samples collected after cleanup for phenolic leachate tests. Phenolic analysis is a good indicator to determine contamination levels since it is a major component in the waste. A result of 1 ppm will indicate adequate decontamination.

C. After the waste container is shipped off-site, fire water will be utilized to remove any residual contamination from the storage area. Rinse waters as collected within the sump will be tested for phenolics to determine the cleanup progress. Rinse waters which tests < 10 ppm will indicate adequate decontamination. All washings will then be removed for biological treatment.

D. Additional testing of water/soil samples for other priority pollutants will delay final closure for at least 2-3 weeks and would prevent continued use of the area for < 90 day storage of hazardous waste until these results were available. It is therefore advisable that any testing to insure decontamination of the site be performed in-house utilizing the phenolics test.

III. Closure Plan (cont.)

Phase III - Closure Certification

A. A registered professional engineer will certify the closure according to the plan.

Waste Management Plan

After closure, waste accumulation dates will be posted for all wastes received at the process waste container area to avoid storage beyond 90 days. The waste management program is as follows:

1. 30 YD Process Waste Container: A sign is located adjacent the container to post initial dates of accumulation for each empty container received.

2. 55 Gallon Waste Drums: Each container placed into storage will be dated and recorded on a waste inventory log.

IV
CLOSURE COSTS
CONTAINER/DRUM STORAGE AREAS

Phase I — Removing Inventory

Off-site disposal estimate, or on-site treatment.

1.	Packaging cost - bulk or special containers, if necessary.	$ ----
2.	Trucking cost to facility (Identify TSD) Wayne Disposal.	$ 1240.
3.	Disposal charge at the facility.	$ 4940.
	SUB-TOTAL COST	$ 6180.

Phase II — Decontamination of the Facility

Cleansing Tank Facilities

1.	Cost of contract cleaning or of rental equipment (e.g., steam cleaning, hydroblasting, or sandblasting) and labor.	$ 480.
2.	Cost of disposal of residues from cleaning.	$ 1910.
3.	Scrap value (reduces cost, if applicable) (-)	$ ----

Phase II Decontamination of the Facility (cont.)

Removing Contaminated Soils (If Required)

1.	Cost to determine if areas around tank facilities are contaminated with hazardous wastes.	$ 260.
2.	Contaminated area in cubic yards to be removed: 2 C.Y.	
3.	Excavation, trucking cost to disposal site, disposal cost at site.	$ 1130.
	SUB-TOTAL COST	$ 1390.

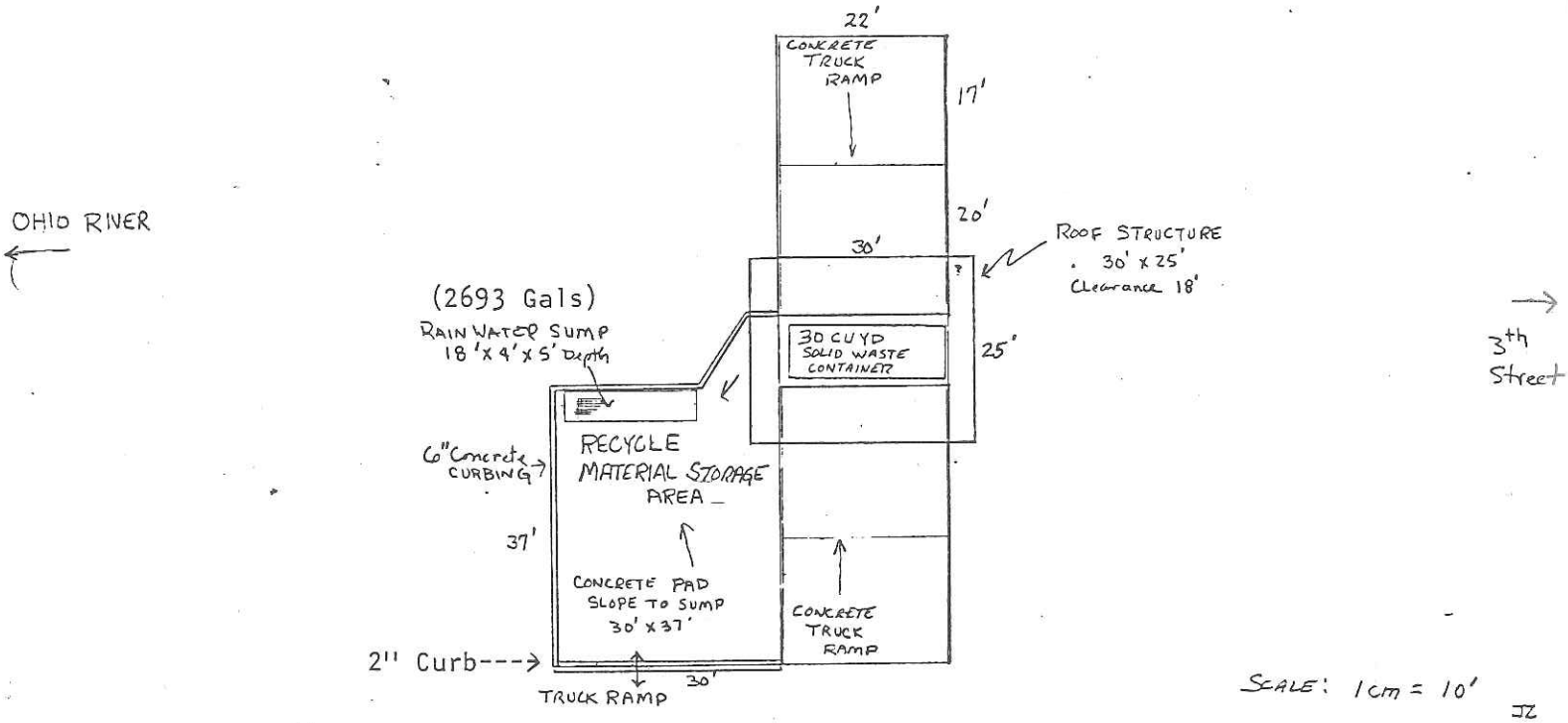
Phase III Closure Certification

Estimate cost of having a registered professional engineer make the necessary inspections and certifications.	$ 720.
ESTIMATE OF CLOSURE COST FOR CONTAINER FACILITY	$ 10,680.

Allied-Signal Inc.
Engineered Materials Sector
Ironton Tar Processing Plant
3330 South Third Street
Ironton, OH 45638
Telephone (614) 533-1040

ATTACHMENT I

STORAGE FACILITY DRAWING

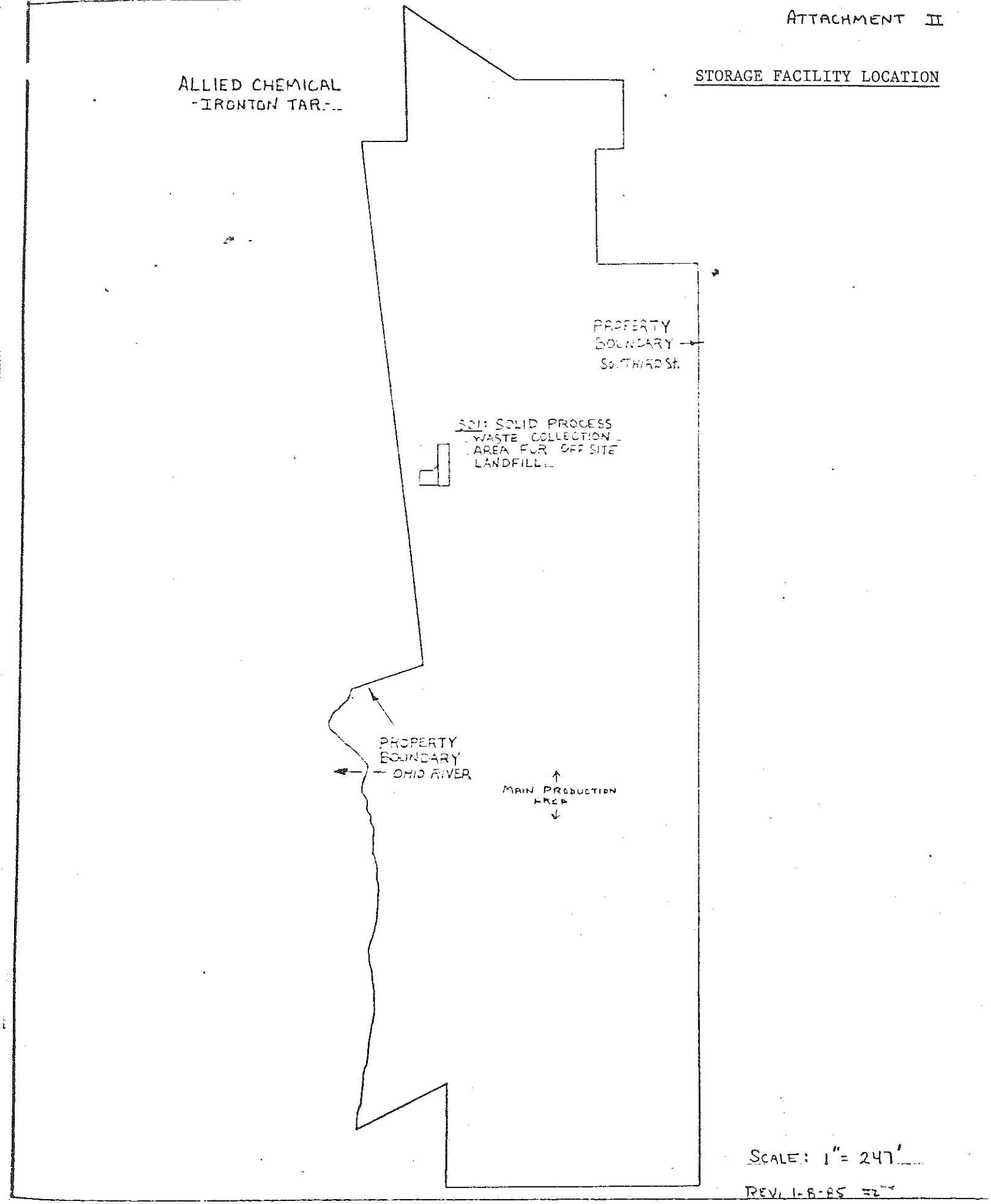


Form Approved OMB No. 158-S80004

V. FACILITY DRAWING *(see page 4)*

ATTACHMENT II

STORAGE FACILITY LOCATION



SCALE: 1" = 247'

REV. 1-8-85

ALLIED

Allied Corporation
Health, Safety & Environmental Sciences
P.O. Box 2332R
Morristown, New Jersey 07960

OHD-043-730-217

March 21, 1986

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Deborah L. Tegtmeyer
Environmental Protection Agency
Office of Land Pollution Control
P.O. Box 1049
361 East Broad Street
Columbus, OH 43266

Dear Ms. Tegtmeyer:

On March 12, 1985, we submitted to your office proof of financial assurance for closure and post-closure care for facilities subject to regulation under Chapters 3745-55 and 3745-66 of the Ohio Administrative Code.

Section 3745-55-42 requires that updated financial data be submitted within 90 days of the close of each fiscal year. For our firm, the fiscal year ends December 31. Thus, we are submitting the updated financial information as specified.

We are also using the financial test to demonstrate financial responsibility for liability coverage as applicable.

The following items are attached:

i. A letter signed by Donald R. Kayser, Senior Vice President, the chief financial officer of Allied-Signal Corporation.

ii. A copy of a report on examination of Allied-Signal Corporation's financial statements for the latest completed fiscal year prepared by Price Waterhouse & Co., an independent certified public accountant.

iii. A special report from Price Waterhouse as required.

Allied-Signal Corporation owns or operates facilities in other Regions, and thus we are submitting identical evidence of financial assurance to the Regional Administrator of such Regions for States where EPA is administering the regulations, as is required by §265.143(g).

We have also attached for your information a summary by States which confirms that the total amount of funds for closure assured by this mechanism is equal to the sum of funds that would be available if a separate mechanism had been established for each facility.

The Ohio facility list no longer shows the Warner & Swasey plant in Cleveland. This deletion was made as the facility was sold in 1984, and the new owner/operator now advises us that financial assurance is no longer required.

Should you have any questions concerning this information, please contact me at (201)455-4947.

Very truly yours,

Robert J. Ford

Robert J. Ford
Corporate Manager
Pollution Control

nb

3-20-86

Allied Signal

Allied-Signal Inc.
P.O. Box 3000R
Morristown, NJ 07960-2496
Telephone: (201) 455-4371

Donald R. Kayser
Senior Vice President and
Chief Financial Officer

Director
Ohio Environmental Protection Agency
Office of Land Pollution Control
P.O. Box 1049
361 East Broad Street
Columbus, OH 43266

Gentlemen:

I am the chief financial officer of Allied-Signal Incorporated, located at Columbia Turnpike, Morristown, New Jersey. This letter is in support of the use of the financial test to demonstrate financial responsibility for liability coverage and closure and/or post-closure care as specified in Chapters 3745-55 and 3745-66 of the Administrative Code.

The owner or operator identified above is the owner or operator of the following facilities for which liability coverage is being demonstrated through the financial test specified in Chapters 3745-55 and 3745-66 of the Administrative Code: See Table I attached.

1. The owner or operator identified above owns or operates the following facilities for which financial assurance for closure or post-closure care is demonstrated through the financial test specified in Chapters 3745-55 or 3745-66 of the Administrative Code. The current closure and/or post-closure cost estimates covered by the test are shown for each facility: See Table I attached.

2. The owner or operator identified above guarantees, through the corporate guarantee specified in Chapters 3745-55 and 3745-66 of the Administrative Code, the closure and post-closure care of the following facilities owned or operated by its subsidiaries. The current cost estimates for the closure or post-closure care so guaranteed are shown for each facility: None.

3. In states where U.S. EPA or a State so authorized is administering the financial requirements of Subpart H of 40 CFR Parts 264 or 265, this owner or operator is demonstrating financial assurance for the closure or post-closure care of the following facilities through the use of a test equivalent or substantially equivalent to the financial test specified in Chapters 3745-55 and 3745-66 of the Administrative Code. The current closure and/or post-closure cost estimates covered by such a test are shown for each facility: See Table IIA and IIB attached.

4. The owner or operator identified above owns or operates the following hazardous waste management facilities for which financial assurance for closure or, if a disposal facility, post-closure care, is not demonstrated to the director through the financial test or any other financial assurance mechanism specified in Chapter 3745-66 or 3745-66 of the Administrative Code. The current closure and/or post-closure cost estimates not covered by such financial assurance are shown for each facility: None.

This owner or operator is required to file a form 10K with the securities and exchange commission (SEC) for the latest fiscal year.

The fiscal year of this owner or operator ends on December 31. The figures for the following items marked with an asterisk are derived from this owner's or operator's independently audited, year-end financial statements for the latest completed fiscal year, ended December 31, 1985.

ALTERNATIVE II

1.	Sum of current closure and post-closure cost estimates (total of all cost estimates listed above)	$ 5,406,346
2.	Amount of annual aggregate liability coverage to be demonstrated	$ 11,000,000
3.	Sum of lines 1 and 2	$ 16,406,346
4.	Current bond rating of most recent issuance and name of rating service	A-1, Moody's
5.	Date of issuance of bond	1/10/86
6.	Date of maturity of bond	1/10/93
*7.	Tangible net worth (if any portion of the closure or post-closure cost estimates is included in "total liabilities" on your financial statements you may add that portion to this line).	$ 4,543,000,000
*8.	Total assets in the U.S. (required only if less than 90% of assets are located in the U.S.)	$11,566,000,000

		YES	NO
9.	Is line 7 at least $10 Million?	X	
10.	Is line 7 at least 6 times line 3?	X	
*11.	Are at least 90% of assets located in the U.S.? . . . If not, complete Line 12.		X
12.	Is line 8 at least 6 times line 3?	X	

I hereby certify that the wording of this letter is identical to the wording specified in paragraph (G) of Rule 3745-55-51 of the Administrative Code as such regulations were constituted on the date shown immediately below.

Donald R. Kayser

Donald R. Kayser
Allied-Signal Incorporated
Senior Vice President
Chief Financial Officer
March 20, 1986

TABLE I

ALLIED-SIGNAL CORPORATION FACILITIES FOR WHICH FINANCIAL ASSURANCE FOR LIABILITY COVERAGE AND CLOSURE AND/OR POST-CLOSURE COST IS BEING DEMONSTRATED BY THE FINANCIAL TEST

STATE	ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Ohio	Ohio 04-44-0059 EPA OHD043730217	Ironton Tar Plant 3330 S. Third Street Ironton, OH 45633	$ 5,055	N/A
		Total, State of Ohio	$ 5,055	N/A

TABLE II A

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES
WHERE EPA IS ADMINISTERING 40 CFR PARTS 264 AND 265, SUBPART H

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Michigan	MID005359286	Prestolite Motor Plant Morton and Backus Sts. Bay City, MI 48706	$60,791	N/A
	MID005517198	Detroit Tar Plant 1200 Zug Island Road Detroit, MI 48232	$26,440	N/A
	MID005359294	Prestolite Wire Plant 3529 24th Street Port Huron, MI 48060	$14,404	N/A
		Total, State Of Michigan	$101,635	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING 40 CFR PARTS 264 and 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Alabama	ALD004003620	Prestolite Electronics Plant Hwy. 20W Decatur, AL 35601	$87,844	N/A
	ALD031499833	Fairfield Tar Plant 1327 Erie Street Fairfield, AL 35064	$31,725	N/A
		Total, State of Alabama	$119,569	N/A

TABLE IIB

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESITMATES	
			CLOSURE	POST-CLOSURE
California	CAD009142290	Bay Point Works Nichols Road Pittsburg, CA 94565	$25,900	N/A
	CAD020159760	Allied Information Systems 31717 La Tienda Drive Westlake Village, CA 91359	$14,081	N/A
	CAD074644659	Baron-Blakeslee, Inc. 8333 Enterprise Drive Newark, CA 94560	$117,000	N/A
	CAD000618652	Baron-Blakeslee, Inc. 3596 California Street San Diego, CA 92101	$49,330	N/A
		Total, State of California	$206,311	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Connecticut	CTD021814777	Printing Development 15-C International Dr. East Granby, CT 06206	$ 12,000	N/A
		Total, State of Connecticut	$ 12,000	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Illinois	ILD005463344	Danville Works Brewer Road Danville, IL 61832	$ 65,600	N/A
	ILD006278170	Allied Chemical Metropolis Works Route 45 N Metropolis, IL 62960	$224,200	N/A
	ILD005471503 1110950001G (State)	Woodstock Die Casting Plant 555 Wheeler Street Woodstock, IL 60098	$ 88,281	N/A
	ILD051937068 (0310510101G) (0316000037) (State)	Baron-Blakeslee, Inc 1634 S. Laramie Avenue Cicero, IL 60650	$ 97,825	N/A
	ILD000814640	UOP Process Juliet Rd & Lawndale Ave. McCook, IL 60525	$ 24,290	N/A
	ILD084741222	UOP Corporate Research Center Algonguin & Mt. Prospect Des Plaines, IL 60017	$130,000	N/A
		Total, State of Illinois	$630,196	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES		TOTAL
			CLOSURE	POST-CLOSURE CARE	
Indiana	IND006377048	Prestolite Battery Plant Hwy. 41 North Vincennes, IN 47591	$61,441	$15,990	$77,431
		Total, State of Indiana	$61,441	$15,990	$77,431

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Louisiana	LAD057109449	UOP Process Division P.O. Box 21566 Shreveport, LA 71120	N/A	$ 19,935
		Total, State of Louisiana	N/A	$ 19,935

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Maryland	MDD069396711	Allied Chemical Baltimore Works 1348 Block Street Baltimore, MD 21231	$ 83,400	N/A
		Total, State of Maryland	$ 83,400	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
North Carolina	NCD053488409	Moncure Plant Pea Ridge Road Moncure, NC 27559	$ 26,090	N/A
		Total, State of North Carolina	$ 26,090	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES		
			CLOSURE	POST-CLOSURE CARE	TOTAL
New York	NYD000632315	Buffalo Research and Development Laboratory 20 Peabody Street Buffalo, NY 14210	$ 16,260	N/A	$16,260
	NYD064337298	C & D Batteries Plant Route 209 Huguenot, NY 12746	$ 96,930	N/A	$96,930
	NYD002244945	Allied Chemical Syracuse Works Milton Avenue Solvay, NY 13209	$ 1,385	N/A	$ 1,385
	NYD001837633	Bendix Electrical Components and Engine Products Divisions Delaware Avenue Sidney, NY 13838	$1,518,711	$52,275	$1,570,986
	NYD002244911	Bendix Fluid Power Division 211 Seward Avenue Utica, NY 13503	$ 10,250	N/A	$10,250

TABLE II B (continued)

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES		TOTAL
			CLOSURE	POST-CLOSURE CARE	
New York	NYD980593149	Syracuse Research Laboratory Milton Avenue Solvay, NY 13209	$ 39,150	N/A	$ 39,150
	NYD002231355	Prestolite Motor Plant 219 Lamson Street Syracuse, NY 13206	$ 11,278	N/A	$ 11,278
		Total, State of New York	$1,693,964	$52,275	$1,746,239

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Ohio	Ohio 04-44-0059 EPA OHD043730217	Ironton Tar Plant 3330 S. Third Street Ironton, OH 45633	$ 5,055	N/A
		Total, State of Ohio	$ 5,055	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Oklahoma	OKD072428642	Prestolite Motor Plant 300 S. E. 15th Street Wagoner, OK 74467	$ 53,932	N/A
		Total, State of Oklahoma	$ 53,932	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Oregon	ORD 061483384	Baron-Blakeslee, Inc. 5920 N.E. 87th Avenue Portland, OR 97220	$128,896	N/A
			$128,896	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
South Carolina	SCD003361987	Columbia Plant St. Andrews Road Columbia, SC 29202	$291,496	N/A
		Total, State of South Carolina	$291,496	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Virginia	VAD023690183	Chesterfield Plant Bermuda Hundred Road Chesterfield County, VA	$ 63,122	N/A
	VAD065385296	Hopewell Plant Route 10 Hopewell, VA 23860	$1,108,000	N/A
		Total, State of Virginia	$1,171,122	N/A

TABLE II B

ALLIED-SIGNAL CORPORATION FACILITIES LOCATED IN STATES WHERE EPA IS NOT ADMINISTERING SUBPART 264 AND 265 AND WHERE EQUIVALENT REGULATIONS EXIST

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Wisconsin	WID006427017	Sinclair Valentine 2010 Indiana St. Racine, WI 53405	$ 60,000	N/A
		Total, State of Wisconsin	$ 60,000	N/A

ALLIED-SIGNAL INC. FACILITIES

SUMMARY: CLOSURE, POST-CLOSURE COST ESTIMATES

	Closure	Post-Closure
Alabama	$ 119,569	
California	206,311	
Connecticut	12,000	
Illinois	630,196	
Indiana	61,441	$ 15,990
Louisiana	---	19,935
Maryland	83,400	
Michigan	101,635	
New York	1,693,964	52,275
North Carolina	26,090	
Ohio	5,055	
Oklahoma	53,932	
Oregon	128,896	
South Carolina	291,496	
Virginia	1,171,122	
Wisconsin	60,000	
Sub-Total	$ 4,645,107	$ 88,200
Contingency	673,039	
	$ 5,318,146	$ 88,200
Total	5,406,346	

February 1986

65 Madison A ue
CN 1965
Morristown, NJ 07960-1965

Telephone 201 540 8980

Price Waterhouse

March 21, 1986

To the Board of Directors
of Allied-Signal Inc.

We have examined the consolidated financial statements of Allied-Signal Inc. and subsidiaries ("Allied-Signal") as of December 31, 1985 and for the year then ended and have issued our report thereon dated February 3, 1986. We have not examined any financial statements of Allied-Signal as of any date or for any period subsequent to December 31, 1985.

We have compared the following data which are shown in the letter dated March 20, 1986 from Mr. Donald R. Kayser, Senior Vice President and Chief Financial Officer of Allied-Signal, to the Various Regional Administrators and State Officials (the "Letters") to the corresponding amounts derived from the aforementioned consolidated financial statements or the detail accounting records from which such financial statements were prepared.

Description	Amount
Tangible Net Worth	$ 4,543,000,000
Total Assets in U.S.	$11,566,000,000

In connection with the foregoing procedure, no matters came to our attention which caused us to believe that the specified data should be adjusted. Because the foregoing procedure does not constitute an examination made in accordance with generally accepted auditing standards, we do not express an opinion on any of the amounts listed above.

We performed no audit or other procedure with respect to amounts shown in the Letters for current closure and post-closure cost estimates. Accordingly, we do not express an opinion or any other form of assurance on such amounts.

This report is intended for the information of the Environmental Protection Agency and should not be used for any other purpose.

Price Waterhouse

FIVE-YEAR COMPARISON OF SELECTED SUPPLEMENTARY FINANCIAL DATA ADJUSTED FOR EFFECTS OF CHANGING PRICES (a)

Years ended December 31	1985	1984(b)	1983(b)	1982(b)	1981(b)
Net Sales					
As reported in financial statements	**$9,115**	$9,462	$8,682	$4,902	$5,400
Restated in average 1985 dollars	**9,115**	9,800	9,375	5,463	6,390
Income (loss) from Continuing Operations					
As reported in financial statements	**(279)**	487	448	281	376
Restated in current cost	**(357)**	381	314	110	238
Shareholders' Equity					
As reported in financial statements	**6,130**	3,043	2,747	2,013	1,900
Restated in current cost	**6,297**	4,162	3,844	3,614	3,832
Foreign Currency Translation Adjustment					
As reported in financial statements	**40**	(49)	(41)	(42)	
Restated in current cost	**42**	(64)	(54)	(67)	
Purchasing power gain	**115**	124	92	93	176
Difference between change in specific prices and change in the general price level	**90**	115	(201)	(19)	195
Per common share:					
Income (loss) from continuing operations:					
–as reported	**(3.28)**	5.02	4.58	4.33	6.67
–in current cost	**(4.00)**	3.66	2.78	.72	3.82
Cash dividends as reported in financial statements	**1.80**	1.75	1.60	1.60	1.57
Cash dividends restated in average 1985 dollars	**1.79**	1.81	1.72	1.77	1.84
Market price (actual at year-end)	**46.75**	34.50	37.13	21.50	29.25
Market price restated in average 1985 dollars	**46.01**	35.23	39.46	23.69	33.48
Average Consumer Price Index for all urban consumers	**322.2**	311.1	298.4	289.1	272.3

(a)Restatements in current costs are in average 1985 dollars.
(b)Restated to reflect The Henley Group on an equity basis.

REPORT OF INDEPENDENT ACCOUNTANTS

65 Madison Ave.
Morristown, New Jersey 07960

Price Waterhouse

February 3, 1986

To the Shareholders and Directors
of Allied-Signal Inc.

In our opinion, the accompanying consolidated balance sheet and the related consolidated statements of income, retained earnings and changes in financial position present fairly the financial position of Allied-Signal Inc. and its consolidated subsidiaries at December 31, 1985 and 1984, and the results of their operations and the changes in their financial position for each of the three years in the period ended December 31, 1985, in conformity with generally accepted accounting principles consistently applied during the period subsequent to the change, with which we concur, in the method of accounting for investment tax credits made as of January 1, 1983, as described in the Summary of Significant Accounting Policies. Our examinations of these statements were made in accordance with generally accepted auditing standards and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

Price Waterhouse
Price Waterhouse

Allied Corporation
Corporate Health,
Safety and Environmental Sciences
P.O. Box 2332R
Morristown, New Jersey 07960

March 25, 1983

Mr. Valdas V. Adamkus
Regional Administrator
Region V
U.S. Environmental Protection Agency
Federal Building
230 South Dearborn
Chicago, IL 60604

Dear Mr. Adamkus:

On July 1, 1982, we submitted to your office proof of financial assurance for closure and post-closure care for facilities subject to regulation under 40 CFR Part 265, Subpart H. These included facilities in Michigan as identified on the attached list.

Allied Corporation chose to demonstrate financial responsibility through use of the financial test (Alternative II) as provided in §265.143(e). Section 265.143(e)(5) requires that updated financial data be submitted within 90 days of the close of each fiscal year. For our firm, the fiscal year ends December 31. Thus, we are submitting herewith the updated financial information as specified.

F
B

The following items, as required by §265.143(e)(3) are attached:

i. A letter signed by Harold W. Buirkle, Senior Vice President, Planning and Finance, the chief financial officer of Allied Corporation, and worded as specified in §264.151(f).

ii. A copy of a report on examination of Allied Corporation's financial statements for the latest completed fiscal year prepared by Price Waterhouse & Co., an independent certified public accountant.

iii. A special report from Price Waterhouse as required by §265.145(e)(3)(iii).

Allied Corporation owns or operates facilities in other Regions, and thus we are submitting identical evidence of financial assurance to the Regional Administrator of such Regions for States where EPA is administering the regulations, as is required by §265.143(g).

We have also attached for your information a summary by States which confirms that the total amount of funds for closure assured by this mechanism is equal to the sum of funds that would be available if a separate mechanism had been established for each facility.

Should you have any questions concerning this information, please contact me at (201)455-4947.

Very truly yours,

George E. Balch

George E. Balch
Corporate Manager
Pollution Control

GEB/jp
cc: Bureau of Environmental Protection
Hazardous Waste Management Office
P. O. Box 30038
Lansing, MI 48909

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Michigan	MID005359286	Prestolite Motor Plant Morton and Backus Sts. Bay City, MI 48706	$ 5,570	N/A
	MID005517198	Detroit Tar Plant 1200 Zug Island Rd. Detroit, MI 48232	$23,850	N/A
	MID005359294	Prestolite Wire Plant 3529 24th Street Port Huron, MI 48060	$ 3,300	N/A
		Total, State of Michigan	$32,720	N/A

ALLIED CORPORATION FACILITIES
SUMMARY - CLOSURE/POST-CLOSURE COST ESTIMATES

March 1983

STATE	CATEGORY	CLOSURE	POST-CLOSURE
Alabama	(3)	$ 234,100	N/A
Arkansas	(2)	8,211	N/A
California	(2)	51,261	N/A
Georgia	(2)	30,564	N/A
Illinois	(2)	695,368	$213,360
Indiana	(2)	14,777	N/A
Iowa	(2)	7,188	N/A
Louisiana	(3)	1,675,350	N/A
Maryland	(3)	170,000	N/A
Michigan	(1)	32,720	N/A
Nebraska	(2)	26,328	N/A
New Jersey	(1)	527,000	N/A
New York	(1)	174,536	N/A
North Carolina	(2)	92,293	N/A
Ohio	(3)	62,709	N/A
Oklahoma	(2)	5,800	N/A
Pennsylvania	(3)	282,857	N/A
Tennessee	(3)	1,160	N/A
Texas	(2)	20,600	N/A
South Carolina	(3)	148,430	N/A
Virginia	(3)	3,194,394	N/A
SUBTOTALS		$7,455,646	$213,360
TOTAL		$7,669,006	

(1) EPA administered program
(2) State administered - equivalent regulations
(3) State administered - without equivalent regulations

Price Waterhouse

65 MADISON AVENUE
MORRISTOWN, NJ 07960
201 540-8980

March 25, 1983

To the Board of Directors
of Allied Corporation

We have examined the consolidated financial statements of Allied Corporation and subsidiaries (the "Corporation") as of December 31, 1982 and for the year then ended and have issued our report thereon dated January 21, 1983. We have not examined any financial statements of the Corporation as of any date or for any period subsequent to December 31, 1982.

We have compared the following amounts which are shown in the letters dated March 25, 1983 from Mr. Harold W. Buirkle, Senior Vice President - Planning and Finance of Allied Corporation, to various Regional Administrators and State Officials (the "Letters") to the corresponding amounts derived from the aforementioned consolidated financial statements:

Description	Amount
Tangible Net Worth	$1,823,000,000
Total Assets in U.S.	$5,432,000,000

We found such amounts to be in agreement. Because the foregoing procedure does not constitute an examination made in accordance with generally accepted auditing standards, we do not express an opinion on any of the amounts listed above.

We performed no audit or other procedures with respect to amounts shown in the Letters for current closure and post-closure cost estimates. Accordingly, we do not express an opinion or any other form of assurance on such amounts.

This report is intended for the information of the Environmental Protection Agency and should not be used for any other purpose.

Price Waterhouse

OHD 043730217 3-25-83

Allied Corporation
P.O. Box 1219R
Morristown, New Jersey 07960

Mr. Valdas V. Adamkus
Regional Administrator
Region V
U.S. Environmental Protection Agency
Federal Building
230 S. Dearborn
Chicago, IL 60604

Dear Sir:

I am the chief financial officer of Allied Corporation, Columbia Turnpike, Morristown, New Jersey 07960. This letter is in support of this firm's use of the financial test to demonstrate financial assurance, as specified in Subpart H of 40 CFR Parts 264 and 265.

1. This firm is the owner or operator of the following facilities for which financial assurance for closure or post-closure care is demonstrated through the financial test specified in Subpart H of 40 CFR Parts 264 and 265. The current closure and/or post-closure cost estimates covered by the test are shown for each facility: See Table I attached.

2. This firm guarantees, through the corporate guarantees specified in Subpart H of 40 CFR Parts 264 and 265, the closure or post-closure care of the following facilities owned or operated by subsidiaries of this firm. The current cost estimates for the closure or post-closure care so guaranteed are shown for each facility: None.

3. In States where EPA is not administering the financial requirements of subpart H of 40 CFR Parts 264 or 265, this firm, as owner or operator or guarantor, is demonstrating financial assurance for the closure or post-closure care of the following facilities through the use of a test equivalent or substantially equivalent to the financial test specified in Subpart H of 40 CFR Parts 264 and 265. The current closure and/or post-closure cost estimates covered by such a test are shown for each facility: See Table II attached.

4. This firm is the owner or operator of the following hazardous waste management facilities for which financial assurance for closure or, if a disposal facility, post-closure care, is <u>not</u> demonstrated either to EPA or a State through the financial test or any other financial assurance mechanism specified in Subpart H or 40 CFR Parts 264 and 265 or equivalent or substantially equivalent State mechanisms. The current closure and/or post-closure cost estimates not covered by such financial assurance are shown for each facility: See Table III attached.

This firm is required to file a Form 10K with the Securities and Exchange Commission (SEC) for the latest fiscal year.

The fiscal year of this firm ends December 31. The figures for the following items marked with an asterisk are derived from this firm's independently audited, year-end financial statements for the latest completed fiscal year, ended December 31, 1982:

Alternative II

1.	Sum of current closure and post-closure cost estimates (total of all cost estimates shown in the four paragraphs above)	$ 7,669,006
2.	Current bond rating of most recent issuance of this firm and name of rating service	A Standard & Poor's
3.	Date of issuance of bond	December 29, 1982
4.	Date of maturity of bond	December 1, 2012
*5.	Tangible net worth (if any portion of the closure and post-closure cost estimates is included in "total liabilities" on your firm's financial statements, you may add the amount of that portion to this line)	$ 1,823,000,000
*6.	Total assets in U.S. (required only if less than 90% of firm's assets are located in the U.S.)	$ 5,432,000,000

		Yes	No
7.	Is line 5 at least $10 million?	X	
8.	Is line 5 at least 6 times line 1?	X	
*9.	Are at least 90% of firm's assets located in the U.S.? If not, complete line 10		X
10.	Is line 6 at least 6 times line 1?	X	

I hereby certify that the wording of this letter is identical to the wording specified in 40 CFR 264.151(f) as such regulations were constituted on the date shown immediately below.

Harold W. Buirkle
Allied Corporation
Senior Vice President
Planning & Finance
March 25, 1983

Price Waterhouse

65 MADISON AVENUE
MORRISTOWN, NJ 07960
201 540-8980

REPORT OF INDEPENDENT ACCOUNTANTS

To the Shareholders and Directors of
Allied Corporation

In our opinion, the accompanying consolidated balance sheet and the related consolidated statements of income, retained earnings and changes in financial position present fairly the financial position of Allied Corporation and its consolidated subsidiaries at December 31, 1982 and 1981, and the results of their operations and the changes in their financial position for each of the three years in the period ended December 31, 1982, in conformity with generally accepted accounting principles consistently applied. Our examinations of these statements were made in accordance with generally accepted auditing standards and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

Price Waterhouse

January 21, 1983

Allied Corporation
Corporate Environmental Affairs
P.O. Box 2332R
Morristown, New Jersey 07960

July 1, 1982

Mr. Valdas V. Adamkus
Regional Administrator
Region V
U.S. Environmental Protection Agency
Federal Building
230 South Dearborn
Chicago, IL 60604

Dear Sir:

Pursuant to 40 CFR Part 265, we are submitting herewith proof of financial assurance for closure and post-closure care for facilities in Region V which are subject to regulation under Subpart H. Since many State regulations are currently in a state of flux with respect to financial responsibility regulations and since it is not entirely clear in all cases as to whether EPA or the State is the administering agency of the moment, we have chosen to provide proof of financial assurance both to the States and to the appropriate EPA Regions for all our facilities. These include facilities in Illinois, Indiana, Michigan and Ohio, as identified on the attached sheets, which are owned or operated by Allied Corporation. We are also submitting, by copy, identical information to the states.

Allied Corporation has chosen to demonstrate financial responsibility through use of the financial test (Alternative II) or the corporate guarantee as provided in §265.143(e). Allied Corporation owns or operates facilities, or is providing the corporate guarantee for facilities in other Regions and thus we are submitting identical evidence of financial assurance to the Regional Administrator of such Regions as is required by §265.143(g).

We have also attached for your information a summary by Region which confirms that the total amount of funds for closure assured by this mechanism is equal to the sum of funds that would be available if a separate mechanism had been established for each facility.

The following items, as required by §265.143(e)(3) and §265.145(e)(3), are attached herewith as demonstration that Allied Corporation meets the financial test for closure and post-closure:

(i) A letter signed by Harold W. Buirkle, Senior Vice President, Planning and Finance, the chief financial officer of Allied Corporation, and worded as specified in §264.151(f).

Allied Corporation
P.O. Box 1219R
Morristown, New Jersey 07960

Regional Administrator
United States Environmental Protection Agency
Region V

Dear Sir:

I am the chief financial officer of Allied Corporation, Columbia Turnpike, Morristown, New Jersey 07960. This letter is in support of this firm's use of the financial test to demonstrate financial assurance, as specified in Subpart H of 40 CFR Parts 264 and 265.

1. This firm is the owner or operator of the following facilities for which financial assurance for closure or post-closure care is demonstrated through the financial test specified in Subpart H of 40 CFR Parts 264 and 265. The current closure and/or post-closure cost estimates covered by the test are shown for each facility as listed on the attached sheets.

2. This firm guarantees, through the corporate guarantee specified in Subpart H of 40 CFR Parts 264 and 265, the closure or post-closure care of the following facilities owned or operated by subsidiaries of this firm. The current cost estimates for the closure or post-closure care so guaranteed are shown for each facility: None.

3. In States where EPA is not administering the financial requirements of subpart H of 40 CFR Parts 264 or 265, this firm, as owner or operator or guarantor, is demonstrating financial assurance for the closure or post-closure care of the following facilities through the use of a test equivalent or substantially equivalent to the financial test specified in the Subpart H of 40 CFR Parts 264 and 265. The current closure and/or post-closure cost estimates covered by such a test are shown for each facility: See attached sheet.

4. This firm is the owner or operator of the following hazardous waste management facilities for which financial assurance for closure or, if a disposal facility, post-closure care, is not demonstrated either to EPA or a State through the financial test or any other financial assurance mechanism specified in Subpart H of 40 CFR Parts 264 and 265 or equivalent or substantially equivalent State mechanisms. The current closure and/or post-closure cost estimates not covered by such financial assurance are shown for each facility: None.

This firm is required to file a Form 10K with the Securities and Exchange Commission (SEC) for the latest fiscal year.

The fiscal year of this firm ends on December 31. The figures for the following items marked with an asterisk are derived from this firm's independently audited, year-end financial statements for the latest completed fiscal year, ended December 31, 1981.

Alternative II

1.	Sum of current closure and post-closure cost estimates (total of all cost estimates shown in the four paragraphs above).	$ 934,847
2.	Current bond rating of most recent issuance of this firm and name of rating service	A - Standard & Poor's and Moody's
3.	Date of issuance of bond.	May 4, 1982
4.	Date of maturity of bond.	1987 to Serial - 2000
*5.	Tangible net worth (if any portion of the closure and post-closure cost estimates is included in "total liabilities" on your firm's financial statements, you may add the amount of that portion to this line). . . .	$ 1,692,000,000
*6.	Total assets in U.S. (required only if less than 90% of firm's assets are located in the U.S.)	$ 4,135,000,000

		Yes	No
7.	Is line 5 at least $10 million?	X	
8.	Is line 5 at least 6 times line 1?.	X	
*9.	Are at least 90% of firm's assets located in the U.S.? If not, complete line 10.		X
10.	Is line 6 at least 6 times line 1?	X	

I hereby certify that the wording of this letter is identical to the wording specified in 40 CFR 264.151(f) as such regulations were constituted on the date shown immediately below.

Harold W. Buirkle
Allied Corporation
Senior Vice President
Planning & Finance
June 18, 1982

(ii) A copy of a report on examination of Allied Corporation's financial statements for the latest completed fiscal year prepared by Price Waterhouse & Co., an independent certified public accountant.

(iii) A special report from Price Waterhouse as required by §265.145(e)(3)(iii)

Should you have any questions concerning the information submitted, please contact me at 201-455-4947.

Very truly yours,

G. E. Balch

G. E. Balch
Corporate Manager
Pollution Control

/jsp

cc: Illinois EPA - Division of Land-Noise Pollution Control
Indiana Board of Health - Solid Waste Section
Michigan Dept. of Natural Resources - Resource Recovery Division
Ohio EPA - Land Pollution Control

ALLIED CORPORATION

FINANCIAL ASSURANCE FOR CLOSURE AND POST-CLOSURE CARE

FINANCIAL TEST AND CORPORATE GUARANTEE

COST ESTIMATES: JUNE 1982

EPA Regions

	Closure	Post-Closure	Total
I	$ 0	$ 0	0
II	961,559. (1)	0	961,559. (1)
III	3,459,394. (2)	0	3,459,394. (2)
IV	435,589.	0	435,589.
V	733,577.	201,270.	934,847.
VI	1,729,318.	0	1,729,318.
VII	31,619.	0	31,619.
VIII	0	0	0
IX	40,161.	0	40,161.
X	0	0	0
Total	$7,391,217. (3)	$201,270.	$7,592,487. (3)

(1) Includes $345,000. covered by corporate guarantee by Allied Corporation for subsidiary Fisher Scientific Company.

(2) Includes $212,000. covered by corporate guarantee by Allied Corporation for subsidiary Fisher Scientific Company.

(3) Includes $557,000. covered by corporate guarantee by Allied Corporation for subsidiary Fisher Scientific Company.

Price Waterhouse

65 MADISON AVENUE
MORRISTOWN, NJ 07960
201 540-8980

June 18, 1982

To the Board of Directors
of Allied Corporation

We have examined the consolidated financial statements of Allied Corporation and subsidiaries (the "Corporation") as of December 31, 1981 and for the year then ended and have issued our report thereon dated January 22, 1982. We have not examined any financial statements of the Corporation as of any date or for any period subsequent to December 31, 1981.

We have compared the following amounts for certain financial information shown in the letter dated June 18, 1982 from Mr. Harold W. Buirkle, Senior Vice President - Planning and Finance of Allied Corporation, to various Regional Administrators (the "Letter") to the corresponding amounts included in the aforementioned consolidated financial statements:

Description	Amount
Tangible Net Worth	$1,692,000,000
Total Assets in U.S.	$4,135,000,000

We found such amounts to be in agreement. Because the foregoing procedure does not constitute an examination made in accordance with generally accepted auditing standards, we do not express an opinion on any of the amounts listed above.

We performed no audit or other procedures with respect to amounts shown in the Letter for current closure and post-closure cost estimates. Accordingly, we do not express an opinion or any other form of assurance on such amounts.

This report is intended for the information of the Environmental Protection Agency and should not be used for any other purpose.

Price Waterhouse

Price Waterhouse

65 MADISON AVENUE
MORRISTOWN, NJ 07960
201 540-8980

REPORT OF INDEPENDENT ACCOUNTANTS

To the Shareholders and Directors of
Allied Corporation

In our opinion, the accompanying consolidated balance sheets and the related consolidated statements of income, retained earnings and changes in financial position present fairly the financial position of Allied Corporation and its consolidated subsidiaries at December 31, 1981 and 1980, and the results of their operations and the changes in their financial position for each of the three years in the period ended December 31, 1981, in conformity with generally accepted accounting principles consistently applied. Our examinations of these statements were made in accordance with generally accepted auditing standards and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

Price Waterhouse

January 22, 1982

EPA REGION V

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE	TOTAL
Illinois	ILD005463344	Danville Works Brewer Road Danville, IL 61832	$ 46,750.	$ 3,270.	
	ILD006278170	Allied Chemical Metropolis Works Route 45 N Metropolis, IL 62960	572,466.	198,000.	
	ILD005471503 1110950001G (State)	Woodstock Die Casting Plant 555 Wheeler Street Woodstock, IL 60098	2,357.	N/A	
		Total, State of Illinois	$621,573.	$201,270.	$822,843

EPA REGION V

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	CURRENT COST ESTIMATES POST-CLOSURE CARE
Indiana	IND000810754	C & D Battery Plant 200 W. Main Street Attica, IN 47918	7,214.	N/A
	IND006377048	Prestolite Battery Plant Hwy. 41 North Vincennes, IN 47591	6,724.	N/A
		Total, State of Indiana	$13,938.	N/A

EPA REGION V CONTINUED

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Michigan	MID005359286	Prestolite Motor Plant Morton and Backus Sts. Bay City, MI 48706	$ 11,330.	N/A
	MID005517198	Detroit Tar Plant 1200 Zug Island Rd. Detroit, MI 48232	22,500.	N/A
	MID005359294	Prestolite Wire Plant 3529 24th Street Port Huron, MI 48060	5,082.	N/A
		Total, State of Michigan	$38,912.	N/A

EPA REGION V CONTINUED

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE	TOTAL
Ohio	OHD043730217	Ironton Tar Plant 3330 S. Third Street Ironton, OH 45633	54,900.	N/A	
	OHD092166859 OHO 092 166 859	Toledo Plant Prestolite Battery Plant (Allied Information Systems Co.) 3026 Summit Street Toledo, OH 43611	4,254.	N/A	
		Total, State of Ohio	$59,154.	N/A	
		Total, Region V	$733,577.	$201,270.	$934,847.

TABLE I

Allied Corporation facilities located in States where EPA is administering the Financial Reqirements of Subpart H of 40 CFR Parts 264 and 265 (i.e., States without interim status approval).

MI, NJ, NY

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
New York	NYD000632315	Buffalo Research and Development Laboratory 20 Peabody Street Buffalo, N Y 14210	$ 9,598	N/A
	NYD064337298	C & D Batteries Plant Route 209 Huguenot, N Y 12746	$87,430	N/A
	NYD002244945	Syracuse Works Milton Avenue Solvay, N Y 13209	$ 6,148	N/A

TABLE I
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	CURRENT COST ESTIMATES POST-CLOSURE CARE
New York	NYT370010241	Syracuse Research Laboratory Milton Avenue Solvay, N Y 13209	$24,300	N/A
	NYD002231355	Prestolite Motor Plant 219 Lamson Street Syracuse, N Y 13206	$22,160	N/A
	NYD051816262	Tonawanda Plant 3821 Niagara River Rd. Tonawanda, N Y 14150	$24,900	N/A
		Total, State of New York	$174,536	N/A

TABLE I
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
New Jersey	NJD002451490	Elizabeth Works 100 North Avenue, East Elizabeth, N J 07201	$361,677	N/A
	NJD054124177	Metuchen Plant Prince Street Metuchen, N J 08840	$ 17,155	N/A
	NJD048794986	Morristown Corp. Hdq. Allied Corporation Park Avenue and Columbia Turnpike Morris Township, N J 07960	$ 28,168	N/A
	NJD052207982	Fisher Scientific Bridgewater Plant Route 202 Bridgewater, N J	$ 30,000	N/A
	NJD004362059	Fisher Scientific Fair Lawn Plant 1 Reagent Lane Fair Lawn, N J	$ 90,000	N/A
		Total, State of New Jersey	$527,000	N/A

TABLE I
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Michigan	MID005359286	Prestolite Motor Plant Morton and Backus Sts. Bay City, MI 48706	$ 5,570	N/A
	MID005517198	Detroit Tar Plant 1200 Zug Island Rd. Detroit, MI 48232	$23,850	N/A
	MID005359294	Prestolite Wire Plant 3529 24th Street Port Huron, MI 48060	$ 3,300	N/A
		Total, State of Michigan	$32,720	N/A

TABLE II

Allied Corporation facilities located in States where EPA is not administering Subpart H of 40 CFR Parts 264 and 265 (i.e., States which have interim status authorization and which have equivalent requirements such that the financial test is acceptable.

AR, CA, GA, IA, IL, IN, NE, NC, OK, TX

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Arkansas	ARD990870081	Allied Chemical Helena Plant Hwy 205 Helena, AR 72342	$8,211	N/A
		Total, State of Arkansas	$8,211	N/A

TABLE II
(Continued)

TATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
California	CAD009142290	Bay Point Works Nichols Road Pittsburg, CA 94565	$23,320	N/A
	CAD008326589	El Segundo Works 850 S. Sepulveda Blvd. El Segundo, CA 90245	$ 1,155	N/A
	CAD041651027	C & D Batteries Plant 265 Roberts Avenue Santa Rosa, CA	$ 8,000	N/A
	CAD047380084	Prestolite Battery Plant 8127 Avenue 304 Visalia, CA 93277	$ 6,084	N/A
	CAD020159760	Allied Information Systems 31717 La Tienda Drive Westlake Village, CA 91359	$12,702	N/A
		Total, State of California	$51,261	N/A

Table II
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Georgia	GAD009703349	C & D Batteries Plant 1835 Industrial Blvd.,NW Conyers, Ga 30207	$21,600	N/A
	GAD003299476	Prestolite Battery Plant 2316 Lawrence Street Atlanta, GA 30344	5,374	N/A
	GAD079383469	Prestolite Electronics Plant Hwy. 72, Mineral Road Elberton, GA 30635	3,590	N/A
		Total, State of Georgia	$30,564	N/A

TABLE II
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE	TOTAL
Illinois	ILD005463344	Danville Works Brewer Road Danville, IL 61832	$49,554	$ 3,480	$ 53,034
	ILD006278170	Allied Chemical Metropolis Works Route 45 N Metropolis, IL 62960	$606,814	$209,880	$816,694
	ILD005471503 1110950001G (State)	Woodstock Die Casting Plant 555 Wheeler Street Woodstock, IL 60098	$ 39,000	N/A	$ 39,000
		Total, State of Illinois	$695,368	$213,360	$908,728

TABLE II
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Indiana	IND000810754 NE ✓	C & D Batteries Plant 200 W. Main Street Attica, IN 47918	$7,650	N/A
	IND006377048 NE ✓	Prestolite Battery Plant Hwy. 41 North Vincennes, IN 47591	$7,127	N/A
		Total, State of Indiana	$14,777	N/A

TABLE II
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
)wa	IAD069619765	Prestolite Battery Plant Grant Street Manchester, IA 52057	$4,126	N/A
	IAD005289913	Marshalltown Instruments Plant 710 South 12th Avenue Marshalltown, IA 50158	$3,062	N/A
		Total, State of Iowa	$7,188	N/A

TABLE II
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Nebraska	NED000003756	Marshalltown Instruments Plant East Hwy. 26 Oshkosh, NE 69154	$ 1,348	N/A
	NED007268626	Allied Chemical Omaha Plant Hwy. 73 & 75 La Platte, NE 68107	$24,980	N/A
		Total, State of Nebraska	$26,328	N/A

TABLE II
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	CURRENT COST ESTIMATES POST-CLOSURE CARE
North Carolina	NCD053488409	Moncure Plant Pea Ridge Road Moncure, N C 27559	$92,293	N/A
		Total, State of North Carolina	$92,293	N/A

TABLE II
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Oklahoma	OKD072428642	Prestolite Motor Plant 300 S. E. 15th Street Wagoner, OK 74467	$5,800	N/A
		Total, State of Oklahoma	$5,800	N/A

TABLE II
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Texas	TXD008080004	Orange Plant Farm Road 1006 Orange, TX 77630	$20,600	N/A
		Total, State of Texas	$20,600	N/A

TABLE III

Allied Corporation facilities located in States which have interim status authorization but which do not have financial assurance mechanisms equivalent or substantially equivalent to Subpart H, 40 CFR Parts 264 and 265.

AL, LA, MD, OH, PA, TN, SC, VA

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Alabama	ALD004003620	Prestolite Electronics Plant Hwy. 20W Decatur, AL 35601	$ 50,000	N/A
	ALD031499833	Fairfield Tar Plant 1327 Erie Street Fairfield, AL 35064	$184,100	N/A
		Total, State of Alabama	$234,100	N/A

TABLE III
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Louisiana	LAD000802868	Baton Rouge South Works Lupine & Ontario Sts. Baton Rouge, LA 70821	$ 8,095	N/A
	LAD096947411	Baton Rouge Polyolefins Plt. 12875 Scenic Highway Baton Rouge, LA 70805	$1,653,000	N/A
	LAD041519067	Allied Chemical Geismar Complex Route 30 Geismar, LA 70734	$ 14,255	N/A
		Total, State of Louisiana	$1,675,350	N/A

TABLE III
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Maryland	MDD069396711	Allied Chemical Baltimore Works 1348 Block St. Baltimore, MD 21231	$170,000	N/A
		Total, State of Maryland	$170,000	

TABLE III
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE	TOTAL
Ohio	OHD043730217	Ironton Tar Plant 3330 S. Third Street Ironton, OH 45633	$58,200	N/A	
	OHD0921166859	Prestolite Battery Plant 3026 Summit Street Toledo, OH 43611	$ 4,509	N/A	
		Total, State of Ohio	$62,709	N/A	

TABLE III
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Pennsylvania	PAD053285557	C & D Batteries Plant Washington & Cherry Sts. Conshohocken, PA 19428	$ 3,490	N/A
	PAD002312791	Frankford Plant Margaret and Bermuda Sts. Philadelphia, PA 19137	$115,000	N/A
	PAD056771405	C & D Batteries Plant 82 E. Main Street Leola, PA 17540	$ 18,510	N/A
	PAD069776185	Pottsville Plant Westwood Road Pottsville, PA 17901	$ 26,160	N/A
	PAD069785632	Prestolite Battery Plant 4700 Fifth St. Highway Reading, PA 19603	$ 2,775	N/A
	PAD990823742	Allied Chemical Delaware Valley Works Route 13 Marcus Hook, PA 19061	$ 21,222	
	PAD004321527	Fisher Scientific Indiana Plant 1410 Wayne Avenue Indiana, PA 15701	$ 12,700	N/A
	PAD002389104	Fisher Scientific Hi-Pure Chemicals Nazareth Plant Plainfield Twp., PA 18064	$ 83,000	N/A
		Total, State of Pennsylvania	$282,857	N/A

TABLE III
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
Tennessee	TDN081195174	C & D Batteries Plant Hwy. 127 Dunlap, TN 37327	$1,160	N/A
		Total, State of Tennessee	$1,160	N/A

TABLE III
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES CLOSURE	POST-CLOSURE CARE
South Carolina	SCD003361987	Columbia Plant St. Andrews Road Columbia, S. C. 29202	$148,430	N/A
		Total, State of South Carolina	$148,430	N/A

TABLE III
(Continued)

STATE	EPA ID NUMBER	PLANT NAME & ADDRESS	CURRENT COST ESTIMATES	
			CLOSURE	POST-CLOSURE CARE
Virginia	VAD023690183	Chesterfield Plant Bermuda Hundred Road Chesterfield County, VA	$ 59,214	N/A
	VAD065385296	Hopewell Plant Route 10 Hopewell, VA 23860	$3,121,000	N/A
	VAD042198119	Petersburg Technical Center Exit 5, I-95, Rt. 620 Petersburg, VA 23803	$ 14,180	N/A
		Total, State of Virginia	$3,194,394	N/A